

1) PLACE OF BIRTH

County of Cherokee  
 Township of Cherokee  
 or  
 No. Town of Cherokee  
 or  
 City of Cherokee  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

No. for this Register City  
**27625**

Registration District No. 10000 Registered No. 48  
 (For use of Local Registrar)  
 (No. .... St. .... Ward)  
 (If child is not yet named, make supplemental report as directed)

2) Full Name of Child William Bird

BOY OR GIRL Boy (4) Sex Male (5) Number in order of birth 1 (6) Age 14 (7) DATE OF BIRTH Sept 14 1923  
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER**  
 (8) FULL NAME John Robert Love  
 (9) PRESENT POSTOFFICE OF FATHER Winds Creek St  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 41  
 (12) BIRTHPLACE Winds Creek St  
 (13) OCCUPATION R.F.T. Carrier  
 (14) Number of children born to mother, including present birth 5

**MOTHER**  
 (15) NAME BEFORE MARRIAGE Kacie Mae Bird  
 (16) PRESENT POSTOFFICE OF MOTHER Winds Creek St  
 (17) COLOR OR RACE White (18) AGE AT LAST BIRTHDAY 35  
 (19) BIRTHPLACE Winds Creek St  
 (20) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth 5

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was 5:20 M., on the date above stated. (Both alive or stillborn) (Hour A. M. or P. M.)  
 (23) (Signature) J. A. Miller  
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Winds Creek St

Given name added from a supplemental report  
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed Oct 9 1923 (28) J. A. Miller Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.