

Form No. 1

(1) PLACE OF BIRTH

County of NewberryTownship of # 2or
Inc. Town ofor
City of

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

File No. — For State Registrar Only

21935

Registration District No. 340v Registered No. 21
(For use of Local Registrar)(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (No. St.; Ward)
 If child is not yet named, make supplemental report as directed(2) Full Name of Child Willie J. Carpenter
 (3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH July 30, 1923
 (Name of Month) (Day) (Year)

 FATHER.
 (8) FULL NAME Willie Carpenter
 (9) PRESENT POSTOFFICE OF FATHER Newberry S.C.
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 26 (Year)
 (12) BIRTHPLACE Newberry Co.
 (13) OCCUPATION Public Works.
 (14) NAME BEFORE MARRIAGE Lady Kinard.
 (15) PRESENT POSTOFFICE OF MOTHER Newberry S.C.
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 20 (Year)
 (18) BIRTHPLACE Newberry Co.
 (19) OCCUPATION Farmer
 (20) Number of children of this mother now living, including present birth 2

 (21) Number of children born to mother, including present birth 3
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
 (22) I hereby certify that I attended the birth of this child, who was Born alive at 8 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

 (23) (Signature) Lizzie Rice (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Newberry S.C. Rte

 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark) Aug 1 1923
 (27) Filed Aug 1 1923 (28) Local Registrar. George S. Poff

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.