

(1) PLACE OF BIRTH

County of CurryTownship of P. R. R. R. R.

Inc. Town of

City of

(No. St. Ward) (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

File No. - For State Registrar Only

9485

Registration District No. 800 Registered No. 20
(For use of Local Registrar)(2) Full Name of Child Lydia Bynah If child is not yet named, make supplemental report as directed(3) BOY OR GIRL girl (4) Twin or Triplet ✓ (5) Number in order of birth 1 (6) Are Parents Married yes (7) DATE OF BIRTH Feb. 28, 1925
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William L. Bynah(9) PRESENT POSTOFFICE OF FATHER St. Matthews(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 67 (Year)(12) BIRTHPLACE South Carolina(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Lillian Kinsley(15) PRESENT POSTOFFICE OF MOTHER St. Matthews(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 40 (Year)(18) BIRTHPLACE South Carolina(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was alive at 2 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) (Signature) Marion K. Graham(23) State whether Physician or Midwife midwife (24) Address of Physician or Midwife St. Matthews

(25) Given name added from a supplemental report

(26) Witness Dr. R. A. Rife (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Apr. 21, 1925 (28) Dr. R. A. Rife 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.