

## (1) PLACE OF BIRTH

County of ParliamentTownship of Antioch

Inc. Town of .....

City of .....

(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

Registration District No. 1560

File No. — For State Registrar Only

17337

Registered No. 13  
(For use of Local Registrar)(2) Full Name of Child Thelma M. Moore

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl

(4) Twin or Triplet

To be answered only in event of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH

BIRTH Aug 9 1923  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

W. L. Moore

(9) PRESENT POSTOFFICE OF FATHER

Wadesville S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

47  
(Years)

(12) BIRTHPLACE

Parliament S.C.

(13) OCCUPATION

Farmer in S. Carolina

## MOTHER.

(14) NAME BEFORE MARRIAGE

Anna M. McFarland

(15) PRESENT POSTOFFICE OF MOTHER

Wadesville S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

37  
(Years)

(18) BIRTHPLACE

Parliament S.C.

(19) OCCUPATION

Housewife

(20) Number of children born to mother, including present birth

9

(21) Number of children of this mother now living, including present birth

6

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 8:50 M., on the date above stated.  
(Born alive or stillborn Hour A. M. or P. M.)(23) (Signature) W. E. Johnston

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Wadesville S.C.

Given name added from a supplemental report

Garnie FairleySept 271923  
Registrar

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed

June 9 1923

(28)

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.

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