(1) PLACE OF BIRTH

County of Newberry S. C.

Township of # 4

or

Inc. Town of Newberry R.F.D.

or

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
29425

Registration District No. ..... Registered No. 99
(For use of Local Registrar)

(2) Full Name of Child Not Named

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

(3) Boy or Girl?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) Date of Birth
Boy	To be answered only in event of Twins or Triplets		no	July 21 1923 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) Full Name	Iddell Renwick.	(14) Name before Marriage	Cleora Sims.
(9) Present Postoffice of Father	Newberry S. C.	(15) Present Postoffice of Mother	Newberry
(10) Color or Race	black	(16) Color or Race	black.
(11) Age at last birthday	21 (Years)	(17) Age at last birthday	21 (Years)
(12) Birthplace	Newberry	(18) Birthplace	Whitmire
(13) Occupation	Public works.	(19) Occupation	farmer.
(20) Number of children born to mother, including present birth	one	(21) Number of children of this mother now living, including present birth	one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 6 A.M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Anna Blair X

(24) State whether Physician or Midwife: Midwife

(25) Address of Physician or Midwife: Newberry SC

Given name added from a supplemental report

..... 19 ....
Registrar

(26) Witness Mrs. H. T. Carlisle
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Sept 13 1923 (28) R M Dudatt
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.