

(1) PLACE OF BIRTH

County of Henry
 Township of Conroy
 or
 Inc. Town of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

64781

Registration District No. 2502 Registered No. 76
 (For use of Local Registrar)

City of (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Joseph Tucker

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

(3) BOY OR GIRL? Boys (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 13 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Joe Tucker(9) PRESENT POSTOFFICE OF FATHER Conroy S C(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE Henry Co(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Hardie(15) PRESENT POSTOFFICE OF MOTHER Conroy S C(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 40 (Years)(18) BIRTHPLACE Henry Co(19) 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 Born alive at 11 9 M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) Sallie Moore(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Conroy

Given name added from a supplemental report

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

(27) Filed June 10 1916 (28) J. D. Boyer 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.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 McCaw, of Columbia.