

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of Spokane

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. 40-2

File No. - For State Registrar Only

33805Registered No. 441
(For use of Local Registrar)(2) Full Name of Child James Melvin Oakman

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

(3) BOY OR
GIRL(4) Twin
or Triplet

To be answered only in case of Twin or Triplet

(5) Number in
order of birth(6) Are
Parents
Married

(7) DATE OF

BIRTH June 6 1923

(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAMEW. E. Oakman(9) PRESENT
POSTOFFICE
OF FATHERSpokane(10) COLOR
OR
RACEWhite(11) AGE AT LAST
BIRTHDAY 34
(Year)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Automobile Salesman(14) Number of children born to
mother, including present birth1

MOTHER.

(15) NAME BEFORE
MARRIAGEJune Sanders(16) PRESENT
POSTOFFICE
OF MOTHERSpokane(17) COLOR
OR
RACEWhite(18) AGE AT LAST
BIRTHDAY 30
(Year)

(19) BIRTHPLACE

S.C.

(20) OCCUPATION

House(21) Number of children of this mother
now living, including present birth1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was at 8:00 M.,
on the date above stated. (Born alive or stillborn) (Hour: M. or P. M.)

(23)

(Signature)

W. W. Boyd

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

SpokaneGiven name added from a supplement-
tal report

(26) Witness

(Signature of Witness necessary only
when question 25 is signed by mark)(27) Filed 11-1-23(28) James C. Copier
Local Registrar.*When there was no attending physician or midwife, then the father, householder, etc., should make this return.
If a child breathing even once, it must not be reported as stillborn. No report is desired of stillbirths
before the fifth month of pregnancy.*When there was no attending physician or midwife, then the father, householder, etc., should make this return.
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