

10-10-11

CERTIFICATE OF BIRTH

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

No. 14. - For State Registrar Only

14416

County of Harvey
Township of Conway
City of Conway

Registration District No. 2502

Registered No. 70
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(1) Full Name of Child Robert Ford Ward If child is not yet named, make supplemental report as directed

(2) SEX OR Boy (3) Date of Birth Feb 15 1923
(4) Time of Birth Yes (5) Place of Birth Home
To be answered only in event of Twin or Triplets

FATHER.
(6) Full Name Eus Ward
(7) Present Residence of Father Conway S. C.
(8) COLOR White (9) AGE AT LAST BIRTHDAY 49
(10) BIRTHPLACE Little River, S. C.
(11) OCCUPATION Public Work
(12) Number of children born to mother, including present birth 4

MOTHER.
(13) Name before Marriage Jennie Vann Giles
(14) Present Residence of Mother Dead -
(15) COLOR White (16) AGE AT LAST BIRTHDAY 32
(17) BIRTHPLACE Tolly Swamp Township.
(18) Occupation
(19) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(20) I hereby certify that I attended the birth of this child, who was born alive at 12 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(21) (Signature) Mrs. Westbury
(22) State whether Physician or Midwife (23) Address of Physician or Midwife Conway S. C.

Informant
William Zipp
Conway S. C.
Registrar

(24) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(25) Date 6/9 1923 (26) J. L. Dyer 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.