

(1) PLACE OF BIRTH

County of HorryTownship of Myrtle Beachor
Inc. Town of.....or
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

File No.—For State Registrar Only

38902

Registration District No. 7509 Registered No. 103
(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <input checked="" type="checkbox"/>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Sept. 17, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME John Henry Hoff(9) PRESENT POSTOFFICE OF FATHER Wellsboro S.C. Rd(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 50
(Year)(12) BIRTHPLACE Marion Co. S.C.(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Rosa W. Rhum(15) PRESENT POSTOFFICE OF MOTHER Wellsboro S.C. Rd(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30
(Year)(18) BIRTHPLACE Horry County, S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 7:20 P M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. D. Thomas(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Fort St.

Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Sept 21, 1922 (28) James L. Smith
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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