

(1) PLACE OF BIRTH

County of Chester
 Township of
 or
 Inc. Town of
 or
 City of Chester
 (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

18052

Registration District No. 11A Registered No. 54
 (For use of Local Registrar)

(2) Full Name of Child

Walter White

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

| | | | | |
|---|--|----------------------------------|--|--|
| (3) BOY OR GIRL <u>Boys</u> | (4) Twin or Triplet? To be answered only in case of Twins or Triplets | (5) Number in order of birth | (6) Age of Parents Married? | (7) DATE OF BIRTH (Name of Month) (Day) (Year) <u>July 24 1907</u> |
| FATHER | | | MOTHER | |
| (8) FULL NAME <u>Thos White</u> | | | (14) NAME BEFORE MARRIAGE <u>Minnie Davis</u> | |
| (9) PRESENT POSTOFFICE OF FATHER <u>Chester</u> | | | (15) PRESENT POSTOFFICE OF MOTHER <u>Chester</u> | |
| (10) COLOR OR RACE <u>Col</u> | (11) AGE AT LAST BIRTHDAY <u>49</u> (Years) | (16) COLOR OR RACE <u>Col</u> | (17) AGE AT LAST BIRTHDAY <u>49</u> (Years) | |
| (12) BIRTHPLACE <u>Chester Co</u> | | | (18) BIRTHPLACE <u>Chester Co</u> | |
| (13) OCCUPATION <u>Carpenter</u> | | | (19) OCCUPATION <u>Houseworker</u> | |
| (20) Number of children born to mother, including present birth <u>1</u> | | | (21) Number of children of this mother now living, including present birth <u>1</u> | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 6:15 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. S. Selles
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed 6-22-07 1907 (28) J. A. Markers 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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FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

MCCAW OF COLUMBIA, COLUMBIA, S. C.

MCCAW