CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only: 5227

(11) PLACE OF BIRTH
County of Spartanburg
Township of Campobello
or
Inc. Town of .....
or
City of ..... (No. ..... St.; ..... Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 4011B Registered No. 7
(For use of Local Registrar)

(2) Full Name of Child Wm Austin Turner — If child is not yet named, make supplemental report as directed

(3) SEX OR SEXES: Boy
(4) Twin or Triplet — To be answered only in event of Twins or Triplets
(5) Number in order of birth
(6) Are Parents Married? yes
(7) DATE OF BIRTH Feb 21 1923 (Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Stanford Turner
(9) PRESENT POSTOFFICE OF FATHER Inman S C
(10) COLOR OR RACE white
(11) AGE AT LAST BIRTHDAY 24 (Years)
(12) BIRTHPLACE S C
(13) OCCUPATION Farmer
(14) Number of children born to mother, including present birth 1

MOTHER.
(14) NAME BEFORE MARRIAGE Beulah Easler
(15) PRESENT POSTOFFICE OF MOTHER Inman S C
(16) COLOR OR RACE white
(17) AGE AT LAST BIRTHDAY 18 (Years)
(18) BIRTHPLACE S C
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) at 2 M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) W J Head M D
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife Campobello S C

Given name added from a supplemental report
..... 19 ....
Registrar

(26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed ..... 19 .... (28) Ben T. Bishop 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.