

(1) PLACE OF BIRTH

County of Marion
Township of Reaser

Inc. Town of

(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

41715

Registration District No. 3265Registered No. 103

(For use of Local Registrar)

(No. St. Ward)

(2) Full Name of Child

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

(3) BOY OR GIRL Boy (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH 11/25/23
(Name of Month) (Day) (Year)

FATHER

MOTHER

(8) FULL NAME Larry Lawrence Hays (14) NAME BEFORE MARRIAGE Wm. Lawrence Hays(9) PRESENT POSTOFFICE OF FATHER Wichita, Kan. (15) PRESENT POSTOFFICE OF MOTHER Wichita, Kan.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Year) (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Year)(12) BIRTHPLACE Wichita, Kan. (18) BIRTHPLACE Wichita, Kan.(13) OCCUPATION Lawyer (19) OCCUPATION Lawyer(20) Number of children born to mother, including present birth 1 (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 11:24 M., on the date above stated. (Born alive or stillborn) (Hour, M. or P.M.)(23) (Signature) L. E. Hays(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Wichita, Kan.

Give name added from a supplemental report

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

(27) Filed 12/25/23 (28) L. E. Hays Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.

(29) Filed 12/25/23 (30) L. E. Hays Local Registrar

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MARION RESERVES FOR BUREAU. VARIOUS VARIATIONS IN THE FORMS OF THIS CERTIFICATE ARE IN USE IN THE SEVERAL COUNTIES OF THE STATE. THE BUREAU OF VITAL STATISTICS HAS THE HONOR TO REQUEST THAT THE LOCAL REGISTRARS BE KEPT ADVISED OF ANY CHANGES IN THE FORMS OF THIS CERTIFICATE. THE BUREAU OF VITAL STATISTICS HAS THE HONOR TO REQUEST THAT THE LOCAL REGISTRARS BE KEPT ADVISED OF ANY CHANGES IN THE FORMS OF THIS CERTIFICATE.