

(1) PLACE OF BIRTH

County of York
 Township of Kings Mt
 or
 Inc. Town of Claver
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

20571

Registration District No. 44.2.7 Registered No. 27
 (For use of Local Registrar)

(No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Edward M. Alvine Shoup If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin born ~~as Triplet?~~ (5) Number in order of birth #1 (6) Are Parents Married? yes (7) DATE OF BIRTH July 2, 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME McAlvine Monroe Shoup

(9) PRESENT POSTOFFICE OF FATHER Claver SC

(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 26
 (Years)

(12) BIRTHPLACE Claver SC

(13) OCCUPATION Banker

(20) Number of children born to mother, including present birth 1. Two

MOTHER.

(14) NAME BEFORE MARRIAGE Clara Beatrice Cook

(15) PRESENT POSTOFFICE OF MOTHER Claver SC

(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 26
 (Years)

(18) BIRTHPLACE Ira SC

(19) OCCUPATION house wife

(21) Number of children of this mother now living, including present birth 1. Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) W H McAlvine(24) State whether Physician or Midwife (25) Address of Physician or Midwife Claver SC

Given name added from a supplemental report

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

(27) Filed June 12 19 23 (28) W H McAlvine 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.