

1. PLACE OF BIRTH

County of RichlandTownship of 7016or
Inc. Town ofor
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 3802

FILE No.—For State Registrar Only

14748Registered No. 9

(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

2. Full Name of Child Estelle Fay Warner

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

3. SEX OR

Girl

4. Twin or Triplet?

1

5. Number in order of birth

1

6. Are Parents Married?

Yes

7. DATE OF BIRTH

Oct 26

(Name of Month) (Day) (Year)

1927

FATHER

8. FULL NAME

James Wilbur Warner

9. PRESENT POSTOFFICE OF FATHER

White Rock

10. COLOR OR RACE

White

11. AGE AT LAST BIRTHDAY

26

(Years)

12. BIRTHPLACE

S.C.

13. OCCUPATION

Machinist

20. Number of children born to mother, including present birth

1

MOTHER

14. NAME BEFORE MARRIAGE

Theresa Eustine Derrin

15. PRESENT POSTOFFICE OF MOTHER

White Rock

16. COLOR OR RACE

White

17. AGE AT LAST BIRTHDAY

28

(Years)

18. BIRTHPLACE

S.C.

19. OCCUPATION

Domestic

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 a.m. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

23. Signature

W. E. Mathias

24. State whether Physician or Midwife

Phys

25. Address of Physician or Midwife

Prison

Given name added from a supplemental report

26. Witness

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

27. Filed

Nov 17 1927

28.

John Henry Hillier

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.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. N.B.—In case of TWINS or TRIPLETS, use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.