

Form No. 1

(1) PLACE OF BIRTH

County of KaifieldTownship of 4or
Inc. Town ofor
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

 No. for State Registrar Only
20884

 Registration District No. 1913 Registered No. 72
 (For use of Local Registrar)
(2) Full Name of Child Willie Mae James If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>July 10 1923</u> (Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>W. F. Farmer</u>	(14) NAME BEFORE MARRIAGE <u>Mary Hopkins</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>Timber Cove, S.C.</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Timber Cove S.C.</u>	(11) AGE AT LAST BIRTHDAY <u>36</u> (Year)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>32</u> (Year)	(18) BIRTHPLACE <u>Lee Co.</u>
(12) BIRTHPLACE <u>Lee Co.</u>	(13) OCCUPATION <u>Mech Operator</u>	(19) OCCUPATION <u>Housewife</u>	(21) Number of children of this mother now living, including present birth <u>4</u>	
(20) Number of children born to mother, including present birth <u>6</u>	CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE:			

 (22) I hereby certify that I attended the birth of this child, who was born alive on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) Samuel R. ...
 (24) State whether Physician or Midwife Physician (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 Aug 10 1923 (28) D. M. H. ... 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.