

(1) PLACE OF BIRTH

County of Anderson
Township of Williamston
or
Inc. Town of Piedmont
or
City of

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
62951

Registration District No. 3 B Registered No. 59

(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 Thurmon S. Shepard

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 — (6) Are Parents Married? Yes (7) DATE OF BIRTH June 20, 1914
To be answered only in case of Twins or Triplets
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Griffin Yefford

(14) NAME BEFORE MARRIAGE Ethel Keys

(9) PRESENT POSTOFFICE OF FATHER Piedmont S.C.

(15) PRESENT POSTOFFICE OF MOTHER Piedmont S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27 (Years)

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 19 (Years)

(12) BIRTHPLACE N.C.

(18) BIRTHPLACE N.C.

(13) OCCUPATION Mill work

(19) OCCUPATION House work

(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 Alive at 8 A.M. on the date above stated. (Born alive or stillborn) (How A. M. or P. M.)

(23) (Signature) A. H. Campbell

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Piedmont

Given name added from a supplemental report

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

(27) Filled July 11, 1914 (28) J. C. Howell 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.

Registrar | (27) July 11, 1914 (28) J. C. Howell 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.

FORM NO. 1, 1914. PRINTED AT THE STATE PRINTING OFFICE, COLUMBIA, S. C. 1914. SEE INSTRUCTIONS FOR FILLING OUT THIS FORM. SEE INSTRUCTIONS FOR FILLING OUT THIS FORM. SEE INSTRUCTIONS FOR FILLING OUT THIS FORM.