

(1) PLACE OF BIRTH

County of Hartsville
 Township of Longfield
 Inc. Town of
 OF
 City of

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

File No.—For State Registrar Only

30119

Registration District No. H-6 Registered No. 138

(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 George Edward Cox 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 Sept 11, 1923
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Lawrence G. Cox
 (9) PRESENT POSTOFFICE OF FATHER Duncan SC R3
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27
 (12) BIRTHPLACE SC (Years)
 (13) OCCUPATION Farmer
 (14) NAME BEFORE MARRIAGE Nellie Linton
 (15) PRESENT POSTOFFICE OF MOTHER Duncan SC R3
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 21
 (18) BIRTHPLACE SC (Years)
 (19) OCCUPATION Housewife
 (20) Number of children born to mother, including present birth 2
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:15 a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Geo E. Thompson

(24) State whether Physician or Midwife

(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

Sept 12, 1923

(28)

E. Thompson
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.