

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

File No.—For State Registrar Only
21972

(1) PLACE OF BIRTH

County of Newberry
 Township of No. 1
 or
 Inc. Town of
 or
 City of

Registration District No. 9428 Registered No. 62
 (For use of Local Registrar)
 (No. Edmund Hall St. 1 Ward 1)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Wade Walter Scarborough
 If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD Boy **(4) Twin or Triplet** No
 To be answered only in case of Twin or Triplet

(5) Are Parents Married Yes **(6) DATE OF BIRTH** July 13 1923
 (Name of Month) (Day) (Year)

(7) FATHER'S FULL NAME Frank Scarborough
(8) PRESENT POSTOFFICE OF FATHER Newberry, S.C.
(9) COLOR OR RACE White **(10) AGE AT LAST BIRTHDAY** 37 (Years)
(11) BIRTHPLACE S.C.
(12) OCCUPATION Mill operator

(13) MOTHER'S NAME BEFORE MARRIAGE Jamess Davenport
(14) PRESENT POSTOFFICE OF MOTHER Newberry, S.C.
(15) COLOR OR RACE White **(16) AGE AT LAST BIRTHDAY** 40 (Years)
(17) BIRTHPLACE S.C.
(18) OCCUPATION Housewife
(19) Number of children of this mother now living, including present birth 7

(20) Number of children born to mother, including present birth 18

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive or stillborn **at** 3 A. M. **on the date above stated.** July 13 1923 **Hour A. M. or P. M.**

(22) (Signature) John Smith **(23) Address of Physician or Midwife** Physician
(24) State whether Physician or Midwife **(25) Address of Physician or Midwife** Physician

Give name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
(27) Filed July 24 1923 **(28) Local Registrar** Edmund Hall

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.

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