

(1) PLACE OF BIRTH

County of MonroeTownship of "Inc. Town of DenmarkCity of "

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

5915

Registration District No. 400 Registered No. 36

(For use of Local Registrar)

(No. of Street and Number) (Ward)

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

2) Full Name of Child Vernon Ross Wilkie If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL

(4) Was it a triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH 3 4 23
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Ross Wilkie

(9) PRESENT POSTOFFICE OF FATHER

Denmark S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

22
(Years)

(12) BIRTHPLACE

Ga

(13) OCCUPATION

Telegraph Operator

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

1

MOTHER.

(14) NAME BEFORE MARRIAGE

Mary Selma Seymour

(15) PRESENT POSTOFFICE OF MOTHER

Denmark S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

19
(Years)

(18) BIRTHPLACE

Kaithersburg

(19) OCCUPATION

Housewife

(20) Number of children of this mother now living, including present birth

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was 32 at (Born alive or 32) (Hour 3 of P. M.) on the date above stated.

(22) (Signature)

(23) State whether Physician or Midwife (24) Address of Physician or Midwife

PhysDenmark S.C.

(Given name added from a supplemental report)

(25) Witness

(Signature of Witness necessary only when question 25 is signed by mark)

(26) Filed

7 1 1923

(27)

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.

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WRITE PLAINLY, USE CAPSULES FOR THE FIRST-BOUN, No. 1. THE OTHER, No. 2, etc., in question 1. N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the

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