

(1) PLACE OF BIRTH

County of Albermarle
 Township of Windsor
 or
 Inc. Town of
 or
 City of

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

File No. — For State Registrar Only
19725

Registration District No. 4401 Registered No. 31
 (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 Wally Charles 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 7/9/23
 To be answered only in event of Twin or Triplet

| FATHER. | | MOTHER. | |
|--|---|---|--|
| (8) FULL NAME <u>Wally Charles</u> | (14) NAME BEFORE MARRIAGE <u>Betty Braker</u> | (9) PRESENT POSTOFFICE OF FATHER <u>Way</u> | (15) PRESENT POSTOFFICE OF MOTHER <u>Way</u> |
| (10) COLOR OR RACE <u>Colored</u> | (11) AGE AT LAST BIRTHDAY <u>40</u> | (16) COLOR OR RACE <u>Colored</u> | (17) AGE AT LAST BIRTHDAY <u>35</u> |
| (12) BIRTHPLACE <u>Hampton County</u> | (18) BIRTHPLACE <u>Hampton Co. S.C.</u> | (19) OCCUPATION <u>Farmer</u> | (20) OCCUPATION <u>Farmer</u> |
| (21) Number of children born to mother, including present birth <u>4</u> | (22) Number of children of this mother now living, including present birth <u>1</u> | | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was born at Way M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(24) (Signature) Mad wife (25) Address of Physician or Midwife Way of S.C.
 (26) State whether Midwife

Given name added from a supplemental report

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

(28) Filed July 17 23 (29) J. C. Rame 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.