

(1) PLACE OF BIRTH

County of YorkTownship of Edinboro

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

No. 1a.—For State Registrar Only

8902

Registration District No. 4409Registered No. 13
(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

Nancy Herbert

If child is not yet named, make supplemental report as directed

(3) Female (4) White (5) Number in order of birth 3rd (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 1 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Walter Worthington Herbert(9) PRESENT POSTOFFICE OF FATHER Rock Hill, S.C.(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 33 (Year)(12) BIRTHPLACE S.C.(13) OCCUPATION Expert Dairyman(14) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Charlotte Johnson(15) PRESENT POSTOFFICE OF MOTHER Rock Hill, S.C.(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 31 (Year)(18) BIRTHPLACE S.C.(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was alive at 1 P. M. on the date above stated. (Hour A. M. or P. M.)(22) (Signature) David C. Bigger

(23) State whether Physician or Midwife

(24) Address of Physician or Midwife Rock Hill, S.C.

Given name added from a supplemental report

(25) Witness

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

(26) Filed 3/14/23

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(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.

A child born before the fifth month of pregnancy, and report is desired of stillbirths before the fifth month of pregnancy.