

(1) PLACE OF BIRTH

County of Spartanburg

Township of Spartanburg

or  
In Town of Spartanburg

or  
City of Spartanburg

### CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only  
**19247**

Registration District No. 4008

Registered No. 162  
(For use of Local Registrar)

(No. Rt # 3 St. 3 Ward)

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

(2) Full Name of Child Clay De Puy Jr If child is not yet named, make supplemental report as directed

3 SEX OR GUILD Boy (1) Twin or Triplet? (2) Number in order of birth (3) Are Parents Married? Yes (7) DATE OF BIRTH June 9 23  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

8 FULL NAME FATHER: Clay De P Smith (14) NAME BEFORE MARRIAGE MOTHER: Lene B Mitchell

9 PRESENT POSTOFFICE OF FATHER Rt. 3 (15) PRESENT POSTOFFICE OF MOTHER Rt 3

10 COLOR OR RACE Wh (11) AGE AT LAST BIRTHDAY 23 (16) COLOR OR RACE Wh (17) AGE AT LAST BIRTHDAY 20  
(Year) (Year)

12 BIRTHPLACE Clark NC (18) BIRTHPLACE Yonkers

13 OCCUPATION Clark (19) OCCUPATION Housewife

20 Number of children born to mother, including present birth 1 (21) Number of children of this mother now living, including present birth 1

#### CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born 12 M., on the date above stated. (Born alive or stillborn Hour M. or P. M.)

(23) (Signature) Josef Allen (24) State whether Physician or Midwife (25) Address of Physic. or Midwife

Given name added from a supplemental report  
19  
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed June 18 1923 (28) Mr. E. T. Parker 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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