

(1) PLACE OF BIRTH

County of SpartanburgTownship of Woodruff

Inc. Town of

(City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. — for State Registrar Only

30273

Registration District No. 4009 Registered No. 96

(For use of Local Registrar)

(No. St. Ward)

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

(2) Full Name of Child Le Roy Jones(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? Yes(7) DATE OF BIRTH Sept. 23 23

(Name Month Day Year)

(8) FULL NAME W. H. J. Jones(9) PRESENT POSTOFFICE OF FATHER Woodruff S.C.(10) COLOR OR RACE Col(11) AGE AT LAST BIRTHDAY 23

(Years)

(12) BIRTHPLACE Spartanburg S.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 2(14) NAME BEFORE MARRIAGE Callie Todd(15) PRESENT POSTOFFICE OF MOTHER Woodruff S.C.(16) COLOR OR RACE Col(17) AGE AT LAST BIRTHDAY 22

(Years)

(18) BIRTHPLACE Spartanburg S.C.(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 12:30 M. on the date above stated.

(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) D. D. R. Anderson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Phys Woodruff S.C.

Given name added from a supplemental report

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191...

Registrar

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

(27) Filed Oct 8 23 (28) Chas. L. Boyter

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.

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

McCaw, of Columbia.