

Form No. 2

AGE OF BIRTH

(1) PLACE OF BIRTH

County of DillonTownship of Cornicheor
Inc. Town ofor
City of

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

Registration District No. 1001Registered No. 7

(For use of Local Registrar)

File No.—For State Registrar Only

25294

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85293

CERTIFICATE OF BIRTH

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STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health(2) Full Name of Child Levin Gary(3) BOY OR GIRL? Boy(4) Twin or Triplet? 1(5) Number in order of birth X(6) Are Parents Married? Yes(7) DATE OF BIRTH Oct 1 1926

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wm Lewis Gary(9) PRESENT POSTOFFICE OF FATHER Hamer Se(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)(12) BIRTHPLACE Marion Co Se(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Levia Johnson(15) PRESENT POSTOFFICE OF MOTHER Hamer Se(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 40 (Years)(18) BIRTHPLACE Columbus Co(19) OCCUPATION House work(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive on the date above stated. (Born alive or stillborn)(23) (Signature) J. M. Smith Hour 8 P. M. or P. M.(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Roxton & Ne

Given name added from a supplemental report

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Registrar

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

(27) Filed Nov 10 1926 (28) D. M. Smith

*When there was no attending physician or midwife, then the father, householder, etc., should make a report as soon as a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

MARGIN RESERVED FOR BINDING.

NOTE: PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
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 5.

Bureau of Columbia