

CERTIFICATE OF BIRTH

File No.—For State Registrar Only

Form No. 1

(1) PLACE OF BIRTH

County of Anderson
Township of Langley
or
Inc. Town of Langley
or
City of Langley
(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
38303

Registered No. 15-8
(For use of Local Registrar)

(2) Full Name of Child

Ernest Gary Swindle

(3) BOY OR GIRL Boy

(4) Type or Triplet

(5) Month of Birth

(6) Day of Month

(7) DATE OF BIRTH

Feb 8 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Ernest Gary Swindle

(9) PRESENT POSTOFFICE OF FATHER

Langley, S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

26

(12) BIRTHPLACE

Langley, S.C.

(13) OCCUPATION

Painter

(20) Number of children born to mother, including present birth

2

MOTHER.

(14) NAME BEFORE MARRIAGE

Lula Pettit

(15) PRESENT POSTOFFICE OF MOTHER

Langley, S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

26

(18) BIRTHPLACE

Langley, 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 8:15 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) Signature

M. J. Swindle

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Langley, S.C.

Given name added from a supplemental report

Witness

E. J. Swindle

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

19
Registrar

Witnessed Dec 20 1923 (26) E. W. Spradley Local Registrar

THIS IS A PERMANENT RECORD. IF THE CHILD IS A TRIPLET, USE A SEPARATE BLANK FOR EACH CHILD. USE ONLY ONE FIRST-BORN. No. 1. THE OTHER, No. 2, etc. In question 1.