

## (1) PLACE OF BIRTH

County of SumnerTownship of McMillan

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

3872

Registration District No. 209 Registered No. ....  
(For use of Local Registrar)(2) Full Name of Child Myrtle Morton If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet To be answered only in event of Twin or Triplet (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 3, 1923  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Mo Clarence Morton  
(9) PRESENT POSTOFFICE OF FATHER Mayville S.C.  
(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 23 (Year)  
(12) BIRTHPLACE Beach Va.  
(13) OCCUPATION Bridge construction  
(14) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Myrtle Annie Munroe  
(15) PRESENT POSTOFFICE OF MOTHER Effingham S.C.  
(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 19 (Year)  
(18) BIRTHPLACE Sumner S.C.  
(19) OCCUPATION Domestic  
(20) 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 K.S.P.N. on the date above stated. (Born alive or stillborn) Hour 1 M or P M

(23) (Signature) [Signature] (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Effingham S.C.

Given name added from a supplemental report

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

(27) Filed (28) 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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