

Form No. 1

(1) PLACE OF BIRTH

County of FlorenceTownship of CamInc. Town of HymonCity of Hymon

(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

40225

Registration District No. 7000Registered No. 108
(For use of Local Registrar)

(2) Full Name of Child

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

1. BOY OR GIRL <u>Girl</u>	2. Total or Triplet? <u>No</u>	3. Number in order of birth <u>1</u>	4. Are Parents Married? <u>Yes</u>	5. DATE OF BIRTH <u>July 4, 1933</u> (Name / Month / Day) (Year)
FATHER			MOTHER	
6. FULL NAME <u>John Evans</u>			7. NAME BEFORE MARRIAGE <u>John Evans</u>	
8. PRESENT POSTOFFICE OF FATHER <u>Hymon</u>			9. PRESENT POSTOFFICE OF MOTHER <u>Hymon</u>	
10. COLOR OR RACE <u>White</u>	11. AGE AT LAST BIRTHDAY <u>46</u> (Years)	12. BIRTHPLACE <u>Florence Co</u>	13. COLOR OR RACE <u>White</u>	14. AGE AT LAST BIRTHDAY <u>32</u> (Years)
15. OCCUPATION <u>Farming</u>			16. OCCUPATION <u>Farming</u>	
17. Number of children born to mother, including present birth <u>6</u>			18. Number of children of this mother now living, including present birth <u>6</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. H. Hinton(24) State whether Physician or Midwife Phys(25) Address of Physician or Midwife Hymon

Given name added from a supplemental report

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

(27) Filed Nov 10 1933 (28) W. H. Hinton Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.