

(1) PLACE OF BIRTH
 County of Anderson
 Township of

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health

File No. — For State Registrar Only
62937

or
 Inc. Town of Registration District No. 3A Registered No. 201
 or
 City of Anderson (No. 16 Lyons St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child. Oscar Lee Roy Vaughn } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 16 1922
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Allen P Vaughn
 (9) PRESENT POSTOFFICE OF FATHER Anderson
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30 (Years)
 (12) BIRTHPLACE Banks Co Ga
 (13) OCCUPATION mill operator
 (20) Number of children born to mother, including present birth 4

MOTHER.
 (14) NAME BEFORE MARRIAGE Archie Smith
 (15) PRESENT POSTOFFICE OF MOTHER Anderson S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 29 (Years)
 (18) BIRTHPLACE Elbert Co Ga
 (19) OCCUPATION House wife
 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 1 A M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. D. Smith
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Anderson S.C.

Given name added from a supplemental report
, 191.....
 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 191..... (28) J. P. Ruyter 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.

Registrar Local Registrar

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NEW YORK: MEXIGEN REGISTERED TRADE MARK. ALL OTHER REGISTRATIONS ARE UNLAWFUL. WITH UNFAIRING INK—THIS IS A PERMANENT RECORD. 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 5.