

## (1) PLACE OF BIRTH

County of BeaufortTownship of Surge

Inc. Town of .....

City of .....

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

## (2) Full Name of Child

William Thomas Phillips

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

(1) BOY OR GIRL

Boy

(2) Twin or Triplet

To be answered only in case of Twin or Triplet

(3) Number in order of birth

(4) Are Parents Married

yes

(5) DATE OF BIRTH

(Name of Month) (Day) (Year)

3 / 3 23

(6) FULL NAME

J. C. Phillips

(7) PRESENT POSTOFFICE OF FATHER

Newry, SC

(8) COLOR OR RACE

white

(9) AGE AT LAST BIRTHDAY

27

(10) BIRTHPLACE

SC

(11) OCCUPATION

Housewife

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

1 2

(13) NAME BEFORE MARRIAGE

Sarah Elizabeth Herbert

(14) PRESENT POSTOFFICE OF MOTHER

Newry, SC

(15) COLOR OR RACE

white

(16) AGE AT LAST BIRTHDAY

28

(17) BIRTHPLACE

SC

(18) OCCUPATION

Housewife

(19) Number of children of this mother now living, including present birth

1 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(20) I hereby certify that I attended the birth of this child, who was... on the date above stated.

(Born alive or stillborn) (Hour A. M. or P. M.)

(21) (Signature)

(22) State whether Physician or Midwife

(23) Address of Physician or Midwife

Given name added from a supplemental report

(24) Witness

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

(25) Filed

4/10/23

(26)

(Signature of 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.

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.

MARRIAGE MEMORANDUM FOR BIRTHING.

WRITE PLAINLY. WITH UNPAID FOR THIS IS A PERMANENT RECORD.

B - In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD. See question 1.

FIRST-BORN. No. 1. THE OTHER, No. 2, etc. In question 1.

McGraw-Hill, Columbia, S. C.

Form 5-6