

(1) PLACE OF BIRTH

County of Pickens

Township of Easley

or  
Inc. Town of Easley

City of

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

File No.—For State Registrar Only  
**42293**

Registration District No. 37-2

Registered No. 181  
(For use of Local Registrar)

(No. .... St.)  
(Word)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
(If child is not yet named, make supplemental report as directed)

(2) Full Name of Child

(a) BOY OR GIRL ✓  
(b) Twin or Triplet ✓  
(c) Number in order of birth 1  
To be answered only in event of Twin or Triplet

(d) Are Parents Married Yes

(e) DATE OF BIRTH Oct 28, 1923  
(Name of Month) (Day) (Year)

MOTHER.

(f) FULL NAME Ralph R. McCallum

(g) PRESENT POSTOFFICE OF FATHER Easley

(h) COLOR OR RACE White (i) AGE AT LAST BIRTHDAY 33 (Year)

(j) BIRTHPLACE Easley S.C.

(k) OCCUPATION Barber

(l) NAME BEFORE MARRIAGE Emie C. Newman

(m) PRESENT POSTOFFICE OF MOTHER Easley S.C.

(n) COLOR OR RACE White (o) AGE AT LAST BIRTHDAY 32 (Year)

(p) BIRTHPLACE Pickens S.C.

(q) OCCUPATION Home

(r) Number of children of this mother now living, including present birth 1

(s) Number of children born to mother, including present birth 1

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) at 7:00 M. on the date above stated. (Hour M. & P. M.)

(23) (Signature) Wm. Shipps (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Easley, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by M.D.) Wm. Shipps

(27) Filed Jan 8, 1924 (28) Wm. Shipps 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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