

Form No. 1

(1) PLACE OF BIRTH

County of Darlington
 Township of Blacksville
 or
 Inc. Town of.....
 or
 City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

6552

Registration District No. 508 Registered No. 26
 (For use of Local Registrar)

(No. 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 William Eugene Woodward (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 49 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 25, 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Richard Woodward(9) PRESENT POSTOFFICE OF FATHER Blacksville(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 49
 (Year)(12) BIRTHPLACE S. C.(13) OCCUPATION Carpenter(14) Number of children born to mother, including present birth 9

MOTHER.

(14) NAME BEFORE MARRIAGE Lottie Mary Wain(15) PRESENT POSTOFFICE OF MOTHER Blacksville(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 38
 (Year)(18) BIRTHPLACE S. C.

(19) OCCUPATION

(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 6 P. M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. A. Lytle M. D.
 (24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed April 10, 1923 (28) H. H. Hammond 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.