Form No. 8

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

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

FILE NO. For State Registrar Only
20813

County of Edgefield
Township of Collins
or
Inc. Town of
or
City of

Registration District No. 1802 Registered No. 16
(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 H. Smith Holmes (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Boy
(4) Twin or Triplet? To be answered only in event of Twins or Triplets
(5) Number in order of birth
(6) Are Parents Married? yes
(7) DATE OF BIRTH July 3 1923 (Name of Month) (Day) (Year)

FATHER	MOTHER
(8) FULL NAME Edward Moody Holmes	(14) NAME BEFORE MARRIAGE Pollie Smith
(9) PRESENT POSTOFFICE OF FATHER Modoc, SC Rt 1	(15) PRESENT POSTOFFICE OF MOTHER Modoc, SC Rt 1
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 42 (Years)	(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34 (Years)
(12) BIRTHPLACE Edgefield, CO SC	(18) BIRTHPLACE Edgefield, CO SC
(13) OCCUPATION Farmer	(19) OCCUPATION Housewife
(20) Number of children born to mother, including present birth Seven	(21) Number of children of this mother now living, including present birth Seven

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 5 a.m. (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) M. G. Whitlock M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Cold Springs SC

Given name added from a supplemental report
Janie Fairey
June 22 1924
Registrar

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

(27) Filed July 10 1923 (28) H. H. Quarles 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.