

## (1) PLACE OF BIRTH

County of Spartanburg  
 Township of .....  
 or  
 Inc. Town of .....  
 or  
 City of Spartanburg (No. ....)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

42671

Registration District No. 44Registered No. 554  
(For use of Local Registrar)(2) Full Name of Child James Earl Spencer

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

(3) SEX OF CHILD

yes

(4) Twin or Triplet

1

(5) Number in order of birth

1

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH

2-23

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Boycette Bruce

(9) PRESENT POSTOFFICE OF FATHER

Spartanburg

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

28

(12) BIRTHPLACE

NC

(13) OCCUPATION

Lab. man

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

1

## MOTHER.

(14) NAME BEFORE MARRIAGE

Minnie C. Spencer

(15) PRESENT POSTOFFICE OF MOTHER

Spartanburg

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

23

(18) BIRTHPLACE

NC

(19) OCCUPATION

Housewife

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

1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 3 P. M. on the date above stated.  
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

(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 1in 24(28) 24

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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