

PLACE OF BIRTH

City of Spartanburg
County of Cherokee
In Town of Chesnee
or
Day (No. _____ St. _____ Ward)

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

FILE No.—For State Registrar Only

301834

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

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

1 Full Name of Child William D'Ormond Hall (If child is not yet named, make supplemental report as directed.)

2 BOY OR GIRL Boy 3. Twin or Triplet? one 4. Are Parents Married? yes 5. DATE OF BIRTH Sept, 27, 1933
(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets.

FATHER

MOTHER

1 FULL NAME William DeOrmond Hall

14. NAME BEFORE MARRIAGE Claire D. Poole

2 PRESENT POSTOFFICE OF FATHER Chesnee, S. C.

15. PRESENT POSTOFFICE OF MOTHER Chesnee, S. C.

3 COLOR OR RACE White 11. AGE AT LAST BIRTHDAY 28
(Years)

16. COLOR OR RACE White 17. AGE AT LAST BIRTHDAY 27
(Years)

4 BIRTHPLACE Chester County S. C.

18. BIRTHPLACE Spartanburg County, S. C.

5 OCCUPATION Auto Dealer

19. OCCUPATION Housewife

6 Number of children born to mother, including present birth 3

20. Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

21. I hereby certify that I attended the birth of this child, who was born live at 12.30 A.M. on the date above stated. (If born live or stillborn) (Hour A.M. or P.M.)

23. Signature [Signature] 24. State whether Physician or Midwife Physician 25. Address of Physician or Midwife Chesnee, S. C.

Give name added from a supplemental report

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

27. Filed _____ 19 _____ 28. _____ Local Registrar

19 _____ 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.