

(1) PLACE OF BIRTH

County of

Spartanburg

Township of

11

or

Inc. Town of

City of

Fairmount

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics
State Board of HealthNo. 11—For State Registrar
30262Registration District No. *4008*Registered No. *26*
(For use of Local Registrar)

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

(2) Full Name of Child *Mary Mozell Wafford*(3) SEX *GIRL* (4) Twin or Triplet *No* (5) Number in order of birth *1* (6) Age *7* (7) DATE OF BIRTH *Sept 7, 1923*
(Month of Month) (Day) (Year)FATHER. (8) FULL NAME *John F. Wafford* (14) NAME BEFORE MARRIAGE *Ruth Wafford*
(9) PRESENT POSTOFFICE OF FATHER *Fairmount* (15) PRESENT POSTOFFICE OF MOTHER *Fairmount*
(10) COLOR OR RACE *white* (11) AGE AT LAST BIRTHDAY *35* (16) COLOR OR RACE *white* (17) AGE AT LAST BIRTHDAY *28*
(12) BIRTHPLACE *SC* (18) BIRTHPLACE *SC*
(13) OCCUPATION *Attorney* (19) OCCUPATION *Housewife*
(20) Number of children born to mother, including present birth *1* (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 *alive* on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) *H. C. Mason* (24) State where Physician or Midwife *South Carolina* (25) Address of Physician or Midwife *Spartanburg*

Given name added from a supplemental report

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

(27) Filed *Oct 2, 1923* (28) *Mrs. C. F. Parker* 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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MARRIAGE RECORDS—NO FOR MISSING. WHEN PLEASED, WITH UNPAID, ETC.—THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, NO. 1, THE OTHER, NO. 2, ETC., IN QUESTION 5. REGISTERED IN COLUMBIA, COLUMBIA, S. C.