

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 4.

(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  
**26345**

County of Spartanburg

Township of Walnut Grove

Inc. Town of .....

City of .....

Registration District No. 4000

Registered No. 12  
(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 John Turner Hughes

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 case of Twin or Triplet (5) Number in order of birth 1st (6) Are Parents Married yes (7) DATE OF BIRTH April 23, 23  
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME E. W. Hughes

(14) NAME BEFORE MARRIAGE Jily May Boyter

(9) PRESENT POSTOFFICE OF FATHER Rockwell

(15) PRESENT POSTOFFICE OF MOTHER Rockwell

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 22  
(Year)

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 25  
(Year)

(12) BIRTHPLACE S.C.

(18) BIRTHPLACE S.C.

(13) OCCUPATION Farmer

(19) OCCUPATION Housewife

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

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 2:00 A.M. on the date above stated. (Born alive or stillborn: (Hour) M. or P. M.)

(23) (Signature) D. F. Hughton M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Andaloo, S.C.

Given name added from a supplemental report

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

(27) Filed Aug 21 1923. (28) J. W. Hatchett 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.