

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town ofor
City of

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

369.1

Registration District No. 8.03 Registered No. 1.3
(For use of Local Registrar)(No. Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)(2) Full Name of Child J. E. Leneath Jr.

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

(3) BOY OR GIRL? Boy(4) Twin or Triplet? 1(5) Number in order of birth 1(6) Are Parents Married? yes(7) DATE OF BIRTH Feb 12, 23

FATHER.

(8) FULL NAME J. E. Leneath(9) PRESENT POSTOFFICE OF FATHER Atlanta(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26
(Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Line man(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Maria Dukes(15) PRESENT POSTOFFICE OF MOTHER S. C. Georgia(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28
(Years)(18) BIRTHPLACE S. C. Georgia(19) OCCUPATION House wife(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 at 10 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. Johnston

(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 Mar 19 1923(28) Mrs. The. Douglas
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.*When there was no attending physician or midwife, then the father, householder, etc., should make this return.
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