

(1) PLACE OF BIRTH

County of Union
 Township of Union
 or
 Inc. Town of
 or
 City of Union

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only
30409

Registration District No. 42-A Registered No. 143
 (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 Samuel Theodore Koon (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet No (5) Number in order of birth 1st (6) Are Parents Married Yes (7) DATE OF BIRTH Sept 18, 23
 (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Herbert Beattie Koon

(9) PRESENT POSTOFFICE OF FATHER Union S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 35
 (Year)

(12) BIRTHPLACE Union Co., S.C.

(13) OCCUPATION Operator in Cotton Mill

(14) Number of children born to father, including present birth Three

MOTHER
 (14) NAME BEFORE MARRIAGE Maybelle Fitzgerald

(15) PRESENT POSTOFFICE OF MOTHER Union S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30
 (Year)

(18) BIRTHPLACE Georgia

(19) OCCUPATION Domestic

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 11 P.M. on the date above stated. (If born as stillborn, please A. M. or P. M.)

(23) (Signature) F. P. Sallee (24) State whether Physician or Midwife (25) Address of Physician or Midwife Union, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 10-10-23 (28) D. S. Saratt 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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