

MARGIN RESERVED FOR RECORDS.

WRITE PLAINLY, WITH EXPANDED SPACES AS A PERMANENT RECORD.
 IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, NO. 1, THE SECOND, NO. 2, ETC.

PLACE OF BIRTH

City of Anderson
 Township of Rowland
 OF
 Town of
 OF
 OF
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

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

No. for State Registrar only

2712470

Registration District No. 314

Registered No. 98
 (For use of Local Registrar)

(2) Full Name of Child

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

(1) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet To be answered only in case of Twin or Triplet	(3) Number in order of birth	(5) Age Present Marked <u>70</u>	(7) DATE OF BIRTH (Name of Month) (Day) (Year) <u>June 23</u>
FATHER			MOTHER	
(10) FULL NAME <u>Edward McEuen</u>			(14) NAME BEFORE MARRIAGE <u>Susan Maynard</u>	
(12) PRESENT POSTOFFICE OF FATHER <u>Anderson, S.C.</u>			(16) PRESENT POSTOFFICE OF MOTHER <u>Anderson, S.C.</u>	
(18) COLOR OR RACE <u>Caucasian</u>	(11) AGE AT LAST BIRTHDAY <u>32</u> (Year)	(17) AGE AT LAST BIRTHDAY <u>28</u> (Year)		
(13) BIRTHPLACE <u>Anderson S.C.</u>			(15) BIRTHPLACE <u>Anderson S.C.</u>	
(19) OCCUPATION <u>Lawyer</u>			(17) OCCUPATION <u>Housewife</u>	
(20) Number of children born to mother, including present birth <u>15</u>			(21) Number of children of this mother now living, including present birth <u>15</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(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 Oct. 11 19 23 (28) H. M. Lawrence Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make the report. 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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