

## (1) PLACE OF BIRTH

County of HanoverTownship of B. B.Inc. Town of Oliver A. C.City of Oliver A. C.

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 401

File No. — For State Registrar Only

13716Registered No. 62

(For use of Local Registrar)

(No. SL Ward)

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

(2) Full Name of Child Tracy E. Ayer

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

(3) SEX OF CHILD Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH 5-8-34

(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

## FATHER.

(8) FULL NAME Tracy E. Ayer(9) PRESENT POSTOFFICE OF FATHER Oliver A. C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 29

(Years)

(12) BIRTHPLACE S. C.(13) OCCUPATION Mechanic

## MOTHER.

(14) NAME BEFORE MARRIAGE Sarah Sanders(15) PRESENT POSTOFFICE OF MOTHER Oliver A. C.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 29

(Years)

(18) BIRTHPLACE S. C.(19) OCCUPATION Housewife(20) Number of children born to mother, including present birth 8(21) Number of children of this mother now living, including present birth 5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 12 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) C. B. Raymond(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Oliver A. C.

Given name added from a supplemental report.

(26) Witness

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

Martin B. Woodward, M. D.

Assistant State Registrar

(27) File June 8, 1934(28) J. E. Bennett

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. 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.