

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

MOCA

(1) PLACE OF BIRTH

County of Orange

Township of

or
Inc. Town of Waltham

or
City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(No. St.; Ward)

(2) Full Name of Child

File No.—For State Registrar
19574

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 3-1-1 (Registered No. 37)
(For use of Local Registrar)

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH June 16 1957
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME John H. Murray
(9) PRESENT POSTOFFICE OF FATHER Don't know
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY Don't know
(12) BIRTHPLACE Toronto, Ont.
(13) OCCUPATION Cotton mill operator
(20) Number of children born to mother, including present birth Two

MOTHER.
(14) NAME BEFORE MARRIAGE Minnie Mae Vossage
(15) PRESENT POSTOFFICE OF MOTHER Waltham, S.C.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 23
(18) BIRTHPLACE Clare, S.C.
(19) OCCUPATION none
(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 at 11:30 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. Bell
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Waltham, 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 June 17 1957 (28) R. A. M. Lee 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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