

(1) PLACE OF BIRTH

County of York  
 Township of Bethel  
 or  
 Inc. Town of \_\_\_\_\_  
 or  
 City of \_\_\_\_\_ (No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_)

# CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

24301

Registration District No. 4400 Registered No. 25  
 (For use of Local Registrar)

(2) Full Name of Child Kenneth Carl Harper child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? \_\_\_\_\_ (5) Number in order of birth 3 (6) Are Parents Married? yes (7) DATE OF BIRTH May 27 22  
 (Name of Month) (Day) (Year)

## FATHER.

## MOTHER.

(8) FULL NAME Paul C. Harper

(14) NAME BEFORE MARRIAGE Mary R. Harper

(9) PRESENT POSTOFFICE OF FATHER York S.C. R.D. #8

(15) PRESENT POSTOFFICE OF MOTHER York S.C. R.D. #8

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26 (Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)

(12) BIRTHPLACE S.C.

(18) BIRTHPLACE S.C.

(13) OCCUPATION farmer

(19) OCCUPATION House wife

(20) Number of children born to mother, including present birth Three

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

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 6 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) John H. Dulaney

(24) State whether Physician or Midwife (25) Address of Physician or Midwife clon S.C.

Given name added from a supplemental report

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

1/8/43 191...  
M.B. Woodward M.D.  
 Registrar

(27) Filed July 12 1922 (28) C. E. Ford 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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