

(1) PLACE OF BIRTH

County of *Williamston*,
Township of *Kingstree*,
or
Inc. Town of.....
or
City of.....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthFile No.—For State Registrar
19430Registration District No. *4.3.4* Registered No. *24*
(For use of Local Registrar)(11) *A. L.* (No. *236 E. R. R. Ave.* 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 *Thomas Epper, Jr.* If child is not yet named, make supplemental report as directed(3) SEX OR CHILD *Boy* (4) Twin or Triplet *—* (5) Number in order of birth *1st* (6) DATE OF BIRTH *March 13, 1923*
To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)FATHER. MOTHER.
(7) FULL NAME *Thomas Epper* (14) NAME BEFORE MARRIAGE *Lessie Byrd*
(8) PRESENT POSTOFFICE OF FATHER *Kingstree, S. C.* (15) PRESENT POSTOFFICE OF MOTHER *Kingstree, S. C.*
(9) COLOR OR RACE *Colored* (11) AGE AT LAST BIRTHDAY *34* (16) COLOR OR RACE *Colored* (17) AGE AT LAST BIRTHDAY *19*
(12) BIRTHPLACE *Kingstree, S. C.* (18) BIRTHPLACE *Kingstree, S. C.*
(13) OCCUPATION *Painter* (19) OCCUPATION *Housekeeper*
(20) Number of children born to mother, including present birth *One* (21) Number of children of this mother now living, including present birth *One*CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
(22) I hereby certify that I attended the birth of this child, who was *born alive* at *8 P. M.*,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)*Sarah Byrd (C)* (23) (Signature) *was the Midwife, 236 N. R. R. Ave. Kingstree, S. C.*
(24) State whether Physician or Midwife (25) Address of Physician or MidwifeGive name added from a supplemental report
(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed *June 15, 1923* (28) *J. G. McEachern* Local RegistrarWhen 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.