

Form No. 1

(1) PLACE OF BIRTH

County of Louren

Township of Wales

OF

Inc. Town of

OR

City of Wadesboro S.C. R#1

(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

File No.—For State Registrar Only
35290

Registration District No. 2907

Registered No. 75
(For use of Local Registrar)

(2) Full Name of Child Joseph Addison Cooper

is not yet named, make supplemental report as directed

(3) BOY OR GIRL boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? Y

(7) DATE OF BIRTH Oct 2nd 22
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Herbert M Cooper

(14) NAME BEFORE MARRIAGE Ernie My Cooper

(9) PRESENT POSTOFFICE OF FATHER Wadesboro Louren S.C. R#1

(15) PRESENT POSTOFFICE OF MOTHER Louren S.C. R#1

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21

(12) BIRTHPLACE Louren Co

(18) BIRTHPLACE Anderson

(13) OCCUPATION Farmer

(19) OCCUPATION housewife

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

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive on the date above stated. (Hour A. M. or P. M.) 2:30 P.M.

(23) (Signature) [Signature]

(24) State North Carolina Physician or Midwife

(25) Address of Physician or Midwife Wadesboro

Given name added from a supplemental report

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

19 Registrar

(27) 10 22 7:30 P.M. 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.

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.

Revised or Colours. Columbia, S. C.