

## (1) PLACE OF BIRTH

County of Anderson  
 Township of Clinton  
 Inc. Town of Clinton  
 City of Clinton

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

No. 2798

Registration District No. 304

Registered No. 8  
 (For use of Local Registrar)

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

(2) Full Name of Child Ernest Hoyt Simpson If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD Boy (4) TIME OF BIRTH 10:30 (5) DATE OF BIRTH Feb 24 1925  
 (6) DAY OF BIRTH 24 (7) MONTH OF BIRTH Feb (8) YEAR OF BIRTH 1925

**FATHER.**  
 (9) FULL NAME Augustus Hampden Simpson  
 (10) PRESENT RESIDENCE OF FATHER Iron O.C.  
 (11) COLOR OR RACE White (12) AGE AT LAST BIRTHDAY 42  
 (13) BIRTHPLACE S.C.  
 (14) OCCUPATION Farmer  
 (15) Number of children born to mother, including present one 8

**MOTHER.**  
 (16) FULL NAME Ellen Kate Simpson  
 (17) PRESENT RESIDENCE OF MOTHER Iron O.C.  
 (18) COLOR OR RACE White (19) AGE AT LAST BIRTHDAY 39  
 (20) BIRTHPLACE S.C.  
 (21) OCCUPATION House Wife  
 (22) Number of children of the mother now living, including present one 6

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(23) I hereby certify that I attended the birth of this child, who was Alive on the date above stated. (24) (Signature) C. H. Hunter (25) Address of Physician or Midwife Iron O.C.

Given name of child from a physician or midwife report

When born Feb 24 1925  
 If a child

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