

## (1) PLACE OF BIRTH

County of ChesterTownship of Chesteror  
In Town ofor  
City of

(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 Register Only

43756

Registration District No. 1107 Registered No. 8

(For use of Local Registrar)

(2) Full Name of Child Wesley Lee Bush If child is not yet named, make supplemental report as directed(1) BOY OR GIRL? Boy(4) Twin or triplet? —(5) Number in order of birth —(6) Are Parents Married? Yes(7) DATE OF BIRTH Oct 19 23

(Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME John Lee Bush(9) PRESENT POSTOFFICE OF FATHER Chester P.C. Buldwin Station(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)(12) BIRTHPLACE Lee County, Va.(13) OCCUPATION Leaf tile(14) Number of children born to mother, including present birth 2

## MOTHER

(15) NAME BEFORE MARRIAGE Bertha Alice Harris(16) PRESENT POSTOFFICE OF MOTHER Chester P.C. Buldwin Station(17) COLOR OR RACE White (18) AGE AT LAST BIRTHDAY 18 (Years)(19) BIRTHPLACE Lee County, Va.(20) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive on Oct 19 23 at Chester P.C. on the date above stated. (Sign Alive or Stillborn) (Hour A. M. or P. M.)(23) (Signature) Thos. A. Bush

(24) State whether Physician or Midwife: (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Feb 9 24 (28) Thos. A. Bush 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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