

(1) PLACE OF BIRTH

County of Harney
 Township of Gallivants
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

41011

Registration District No. 967.0 Registered No. 134
 (For use of Local Registrar)

(No. St. Word)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

(1) SEX OF CHILD Girl (2) Type of Triple To be answered only in case of Twin or Triple (3) Number in order of birth 1 (4) Are Parents Married Yes (5) DATE OF BIRTH Dec. 14, 1923
 (Name of Month) (Day) (Year)

FATHER.

(6) FULL NAME Oliver Guley Aiford
 (7) PRESENT POSTOFFICE OF FATHER Gallivants Harney
 (8) COLOR OR RACE White (9) AGE AT LAST BIRTHDAY 24 (Year)
 (10) BIRTHPLACE Harney County
 (11) OCCUPATION Farmer
 (12) Number of children born to mother, including present birth 1

MOTHER.

(13) NAME BEFORE MARRIAGE Edith Jane Rank
 (14) PRESENT POSTOFFICE OF MOTHER Gallivants Harney
 (15) COLOR OR RACE White (16) AGE AT LAST BIRTHDAY 26 (Year)
 (17) BIRTHPLACE Harney County
 (18) OCCUPATION Housewife
 (19) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(20) I hereby certify that I attended the birth of this child, who was born alive at 1 P.M. on the date above stated. (Born alive or stillborn) Hour, M. or P. M.

(21) (Signature) S. J. Rogers, M.D. (22) Address of Physician or Midwife W. C. Williams, S.O.
 (23) State whether Physician or Midwife

Given name added from a supplemental report

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

(25) Filed Dec 20 19 23 (26) Geo M. Huggins 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. 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.