

Form No. 1

(1) PLACE OF BIRTH

County of SpartanburgTownship of W. Grove

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

36518

Registration District No. 4010Registered No. 47
(For use of Local Registrar)

(No. 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 Benjamin Sanford Jr.

If child 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? Yes(7) DATE OF BIRTH Sept. 14, 1922
(Name Month) (Day) (Year)

FATHER.

(8) FULL NAME Benjamin Sanford(9) PRESENT POSTOFFICE OF FATHER Moore #2 S.C.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 36
(Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 9

MOTHER.

(14) NAME BEFORE MARRIAGE Molly Hucabee(15) PRESENT POSTOFFICE OF MOTHER Moore #2 S.C.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 35
(Years)(18) BIRTHPLACE S.C.(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 A.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) James Simmons(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Moore #2 S.C.

Given name added from a supplemental report

(26) Witness J. W. Hatchett

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

(27) Filed Nov. 1, 1922(28) J. W. Hatchett 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.

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 2.

Bureau of Columbia, Columbia, S. C.