

(1) PLACE OF BIRTH

County of Horry.....Township of Simpson Creek.....

Inc. Town of.....

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 HealthFile No. for State Register
43004Registration District No. 3509 Registered No. 115
(For use of Local Registrar)(2) Full Name of Child Edna Butler

(If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Oct. 25 1932</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>William Butler</u>			(14) NAME BEFORE MARRIAGE <u>Frankie Todd</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Loris, S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Loris, S.C.</u>	
(11) COLOR OR RACE <u>Colored</u>			(17) AGE AT LAST BIRTHDAY <u>31</u> (Year)	
(12) BIRTHPLACE <u>Horry Co. S.C.</u>			(18) BIRTHPLACE <u>Horry Co. S.C.</u>	
(13) OCCUPATION <u>Labarer</u>			(19) OCCUPATION <u>Labarer</u>	
(20) Number of children born to mother, including present birth <u>4</u>			(21) Number of children of this mother now living, including present birth <u>3</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive..... at 6 P... M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Dora Hardas(24) State whether Physician or Midwife
MIDWIFE(25) Address of Physician or Midwife
Loris, S.C.

Given name added from a supplemental report

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

(27) Date Nov 19 1932 (28) Local Registrar
[Signature]*When the father, mother, or other household member, or the father, householder, etc., should make this return.
If a child is born dead, it must be reported as stillborn. No report is desired of stillbirths occurring during the third month of pregnancy.