

(1) PLACE OF BIRTH

County of Jasper
 Township of Robert
 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

4277

Registration District No. 2608Registered No. 9
 (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 Theodore Horton

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

(3) SEX <u>Boy</u>	(4) Twin or Triplet To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Are Parents Married <u>Yes</u>	(7) DATE OF BIRTH <u>July 30, 23</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Frank Horton</u>			(14) NAME BEFORE MARRIAGE <u>Mary Jenkins</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Pinebluff, S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Pinebluff, S.C.</u>	
(10) COLOR OR RACE <u>Coe</u>	(11) AGE AT LAST BIRTHDAY <u>40</u> (Years)	(16) COLOR OR RACE <u>Coe</u>		
(12) BIRTHPLACE <u>Pinebluff, S.C.</u>		(17) AGE AT LAST BIRTHDAY <u>38</u> (Years)		
(13) OCCUPATION <u>Farmer</u>		(18) BIRTHPLACE <u>Hampton, S.C.</u>		
(19) OCCUPATION <u>Farmer</u>		(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>9</u>		(21) Number of children of this mother now living, including present birth <u>8</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Allen B. Cantling(24) Allen B. Cantling Physician or Midwife(25) Address of Pinebluff, S.C. or MidwifeGiven name added from a supplement-
 tal report(26) Witness H.C. Jordon(Signature of Witness necessary only
 when question 22 is signed by mark)(27) Filed 7/27 19 23

(28)

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.

(Copy)