

## (1) PLACE OF BIRTH

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

No. 1a.—For State Registrar Only

28456

County of Myrtle

Township of .....

Inc. Town of .....

City of MyrtleRegistration District No. 22aRegistered No. 40

(For use of Local Registrar)

City of Myrtle (No. 18 St. 6 Ward) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)(2) Full Name of Child Ruth Ophelia If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD <u>Girl</u>	(4) Twin or Triplet <u>Yes</u> To be answered only in event of Twin or Triplet	(5) Number in order of birth <u>1</u>	(6) Are Parents Married <u>Yes</u>	(7) DATE OF BIRTH <u>Sept 2</u> (Month) (Day) (Year) <u>1923</u>
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FATHER.

(8) FULL NAME Frank Ophelia

(9) PRESENT POSTOFFICE OF FATHER Myrtle SC

(10) COLOR OR RACE N (11) AGE AT LAST BIRTHDAY 23 (Year)

(12) BIRTHPLACE SC.

(13) OCCUPATION Sept 10 1923

(14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Bonnie A. Houser

(15) PRESENT POSTOFFICE OF MOTHER Same

(16) COLOR OR RACE N (17) AGE AT LAST BIRTHDAY 18 (Year)

(18) BIRTHPLACE N.C.

(19) OCCUPATION Housewife

(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 Ruth Ophelia on the date above stated. (Hour all-day stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

(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 mark)

(27) Filed Oct 3, 1923 (28) E. Smith 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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