

## (1) PLACE OF BIRTH

County of Caydon  
 Township of Ward  
 or  
 Inc. Town of Ward  
 or  
 City of Ward

## CERTIFICATE OF BIRTH

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

No. 19865 - For State Registrar Only

Registration District No. 3.1.2. Registered No. 3.3.  
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

## (2) Full Name of Child

Inf. Intoch

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

3) BOY OR GIRL Girl 4) Type or Token ✓ 5) Number in order of birth ✓ 6) Are Parents Married yes 7) DATE OF BIRTH June 15, 1923  
 To be answered only in event of Twin or Triplet (Signed Month) (Day) (Year)

## FATHER.

8) FULL NAME Brady M. Intoch  
 9) PRESENT POSTOFFICE OF FATHER Shir, R. F. H. #1  
 10) COLOR OR RACE N 11) AGE AT LAST BIRTHDAY 20 (Year)  
 12) BIRTHPLACE Anderson Co. S.C.  
 13) OCCUPATION Home laborer

## MOTHER.

14) NAME BEFORE MARRIAGE Thel. Intoch  
 15) PRESENT POSTOFFICE OF MOTHER Shir S.C. R. F. H. #1  
 16) COLOR OR RACE N 17) AGE AT LAST BIRTHDAY 17 (Year)  
 18) BIRTHPLACE Anderson Co. S.C.  
 19) OCCUPATION Housewife

20) Number of children born to mother, including present birth 1.1 21) Number of children of this mother now living, including present birth 1.1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

22) I hereby certify that I attended the birth of this child, who was born live at 7:19 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

23) (Signature) W. J. P. Smith  
 24) State whether Physician or Midwife Physician 25) Address of Physician or Midwife Anderson S.C.

Given name added from a supplemental report

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

27) Filed Aug. 28 1923. 28) E. C. Anderson 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.

29) Registrar 30) Filed Aug. 28 1923 31) E. C. Anderson Local Registrar

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