

(1) PLACE OF BIRTH

County of YorkTownship of York

OR

Inc. Town of York

OR

City of York

(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 Health

File No.—For State Registrar Only

19034

Registration District No. 2505 Registered No. 57
(For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth 1(6) Are Parents Married? Yes

(7) DATE OF

BIRTH 26, 10, 03
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John J. Smith(9) PRESENT POSTOFFICE OF FATHER York, S.C.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 35
(Years)(12) BIRTHPLACE York, S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE John J. Smith(15) PRESENT POSTOFFICE OF MOTHER York, S.C.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 35
(Years)(18) BIRTHPLACE York, S.C.(19) OCCUPATION Farmer(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 at 10:00 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) John J. Smith(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife York, 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 Nov 10 1903 (28) John J. 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 be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.