

(1) PLACE OF BIRTH

County of Anderson  
Township of .....  
or  
Inc. Town of .....  
or  
City of .....

CERTIFICATE OF BIRTH

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

Registration District No. 313

File No. 31007

Registered No. 48  
(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

(a) SEX Male (b) Type of Birth ✓ (c) Number in order of birth ✓ (d) Age at birth yes (e) Date of birth Oct 25-28  
(f) Name of child (g) (h) (i)

FATHER  
(a) Full name Emil Adolphus Ketzinger

(b) Present residence of father Anderson S.C. R.F.D. #7

(c) Color W (d) Age at last birthday 27

(e) Birthplace Anderson Co. S.C.

(f) Occupation Farmer

(g) Number of children born to mother, including present birth 7

MOTHER  
(a) Name before marriage Lucia Almas Egin

(b) Present residence of mother Anderson S.C. R.F.D. #7

(c) Color W (d) Age at last birthday 28

(e) Birthplace Anderson Co. S.C.

(f) Occupation Housewife

(g) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(28) I hereby certify that I attended the birth of this child, who was born alive at 6:28 M., on the date above stated. (Normal live or stillborn) (Date A. M. or P. M.)

(29) (Signature) Alma V. Pruitt  
(30) State whether Physician or midwife Physician (31) Address of Physician or Midwife Anderson S.C.

Given name added from a supplementary report

(32) Witness (Signature of Witness necessary only when question 28 is signed by mark)

(33) Date Nov. 23-23 (34) C. A. O. Hod 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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MARGIN RESERVED FOR INDEXING

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

IN 2-25 USE OF TUBES OR TRIPLETS AND A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-DOOR, No. 1. THE OTHER, No. 2, etc., IN QUESTION 2.