

(1) PLACE OF BIRTH

County of CherokeeTownship of UnionInc. Town of Gaffney S.C.City of Gaffney S.C.

(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

17067

Registration District No. 102 Registered No. 157

(For use of Local Registrar)

(No. 835 Union St.; Ward)(2) Full Name of Child Billy Stroup Paris If child is not yet named, make supplemental report as directed(3) BOY (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH June 29 1923

FATHER.

(8) FULL NAME William Dave Paris(9) PRESENT POSTOFFICE OF FATHER Gaffney S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 21 (Years)(12) BIRTHPLACE Cherokee Co. S.C.(13) OCCUPATION Miner(14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Annis Mae Stroup(15) PRESENT POSTOFFICE OF MOTHER Gaffney S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20 (Years)(18) BIRTHPLACE Cherokee Co. S.C.(19) OCCUPATION House wife(20) 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 born as 4:30 A.M. (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.(23) (Signature) W. S. Stroup(24) State whether Physician or Midwife (25) Address of Physician or Midwife Gaffney S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 7/10 1923 (28) W. S. Stroup 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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FIRST-BORN, No. 1. THE OTHER, No. 2, etc. In question 1.

to Gov. of Columbia.