

WRITE PLAINLY. WITH UNFADING INK.—THIS IS A PERMANENT RECORD.  
 IN BIRTH CASES OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE  
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.

(1) PLACE OF BIRTH  
 County of Pickens  
 Township of Central  
 or  
 Inc. Town of.....  
 or  
 City of.....

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

No. 4037—For State Registrar Only

Registration District No. 3702 Registered No. 20  
 (For use of Local Registrar)  
 (No. .... St.; ..... Ward)

(2) Full Name of Child Hubert Franklin Gallaway 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 (6) Are Fresh Marriages Yes (7) DATE OF BIRTH Feb 19 23  
 (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Hubert Franklin Gallaway  
 (9) PRESENT POSTOFFICE OF FATHER Central S.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27  
 (Years)  
 (12) BIRTHPLACE S.C.  
 (13) OCCUPATION Teacher  
 (14) Number of children born to mother, including present birth 3

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Annie May Mauldin  
 (15) PRESENT POSTOFFICE OF MOTHER Central S.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27  
 (Years)  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION House keeper  
 (20) Number of children of this mother now living, including present birth 3

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was.... Alive..... at 6:15 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. Beauden  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Central S.C.

Given name added from a supplemental report  
 .....  
 ..... 19 .. Registrar

(26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed Feb 20 23 (28) J. H. Beauden 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.

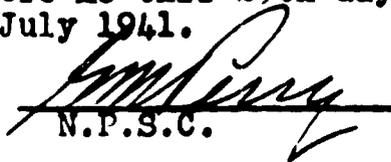
AFFIDAVIT

STATE OF SOUTH CAROLINA  
COUNTY OF PICKENS.

Personally appeared before me, Archelus Franklin Galloway, who being duly sworn, depose and says that he is the father of Furber Franklin Galloway, and that the said Furber Franklin Galloway was born at Central, in the County of Pickens, State of South Carolina, February 19th 1923. He further states that Doctor J.D. Bearden was the attending physician at the birth of the above named child. He further states that this affidavit is being made in order to correct the name as shown on the Birth Certificate of the above named child, from Herbert Franklin Galloway, to Furber Franklin Galloway which is the true and correct name given this child at birth.



Sworn and subscribed to  
before me this 29th day  
of July 1941.



N.P.S.C.