

16 092876

U. S. Dept. of Commerce
Bureau of the Census

1. PLACE OF BIRTH

County of Aiken

Township of

or
Inc. Town of Wagneror
City of

Standard Certificate of Birth

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 203 Registered No.

(For use of Local Registrar)

(No. WACHING St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number)2. FULL NAME OF CHILD Jack Willie Kitchening {If child is not yet named, make supplemental report as directed.3. Boy or girl Boy If Plural births 4. Twin, triplet or other 5. Number, in order of birth 6. Premature Full term 7. Are Parents Married? yes 8. Date of birth Nov. 23, 1943 (Month, day, year)9. Full name Leroy Kitchening FATHER18. Name before marriage Mattie Kitchening MOTHER10. Residence (mailing address) Wagner, S.C. (If non-resident, give place and State)19. Residence (mailing address) Wagner, S.C. (If non-resident, give place and State)11. Color or race Col. 12. Age at child's birth 21 (years)20. Color or race Col. 21. Age at child's birth 19 (years)13. Birthplace (city or place) Wagner, S.C. (State or country)22. Birthplace (city or place) Wagner, S.C. (State or country)14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Farming23. Trade, profession, or particular kind of work done, as house-keeper, typist, nurse, clerk, etc. Housewife

15. Industry or business in which work done, as silk mill, sawmill, bank, etc.

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.

16. Date (month and year) last engaged in this work 17. Total time (years) spent in this work 19.....

25. Date (month and year) last engaged in this work 26. Total time (years) spent in this work 19.....

27. Number of children of this mother (At time of birth and including this child (a) Born alive and now living (b) Born alive but now dead (c) Stillborn

28. If stillborn, period of gestation months weeks 29. Cause of stillbirth Before labor During labor

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify to the birth of this child, who was born at alivem. on the date above stated.
(Born alive or stillborn){ When there was no attending physician
or midwife, then the father, householder,
etc., should make this return. }Given name added from
a supplementary report
(Date of)(Signed) Mattie Kitchening Parent

or Guardian

Address Wagner, S.C.Filed May 25, 1943 M. B. Woodward, M.D.
Registrar.

Registrar.

MARGIN RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK--THIS IS A PERMANENT RECORD--In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

(See instructions on Back of Certificate.)

N. B.