

(1) PLACE OF BIRTH

County of CatawbaTownship of LangleyInc. Town of P.C.City of Gloverville

(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

40664

Registration District No. V.179 Registered No. 171

(For use of Local Registrar)

(2) Full Name of Child Ester Lerma Hydriest

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

(3) BOY OR GIRL? Girl(4) Twin or triplet? one

To be answered only in event of Twins or Triplets

(5) Number in order of birth one(6) Are Parents Married? yes

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Audrey Hydriest

(9) PRESENT POSTOFFICE OF FATHER

Langley S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

21 (Years)

(12) BIRTHPLACE

Langley S.C.

(13) OCCUPATION

Cotton Mill Oper

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

one

MOTHER.

(14) NAME BEFORE MARRIAGE

Ruth Goodman

(15) PRESENT POSTOFFICE OF MOTHER

Langley S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

17 (Years)

(18) BIRTHPLACE

Langley S.C.

(19) OCCUPATION

Cotton Mill Oper

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

one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Physician

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Langley 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 Dec. 17, 1917(28) L. W. Spradley

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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