

(1) PLACE OF BIRTH

County of YorkTownship of Fort Millor Inc. Town of Fort MillCity of Fort Mill

(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

Registration District No. 14406Registered No. 18-

(For use of Local Registrar)

(2) Full Name of Child Augustus Lewis Starn

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

(3) SEX OF CHILD <u>Male</u>	(4) Twin or Triplet? <u>No</u> To be answered only in case of Twin or Triplet	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Feb 9 1923</u> (Month) (Day) (Year)
(8) FULL NAME OF FATHER <u>John Robert Starn</u>		(9) NAME BEFORE MARRIAGE <u>Walter C. Starn</u>		
(10) PRESENT POSTOFFICE OF FATHER <u>Fort Mill SC</u>		(11) PRESENT POSTOFFICE OF MOTHER <u>Fort Mill SC</u>		
(12) COLOR OR RACE <u>W</u>	(13) AGE AT LAST BIRTHDAY <u>23</u> (Years)	(14) COLOR OR RACE <u>W</u>	(15) AGE AT LAST BIRTHDAY <u>22</u> (Years)	
(16) BIRTHPLACE <u>P.C.</u>		(17) BIRTHPLACE <u>P.C.</u>		
(18) OCCUPATION <u>Clerk</u>		(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>2</u>		(21) Number of children of this mother now living, including present birth <u>Two</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

alive(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn on the date above stated.(23) (Signature) Joseph D. Starn MD(24) State whether Physician or Midwife Physician

Given name added from a supplemental report

(25) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(26) Filed May 9 1923(27) Q. L. Parks

(28) 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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