

PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

87549

City of Spartanburg
County of Anderson
or
Town of
or
of

Registration District No. 4009 Registered No. 144
(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

Full Name of Child

BOY OR GIRL Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Oct 28, 1916
(Name of Month) (Day) (Year)

FATHER.

FULL NAME Walt Bots

PRESENT POSTOFFICE OF FATHER Campbell S.C.

(1) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 22
(Years)

(2) BIRTHPLACE Spartanburg

(3) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Liza Smith

(15) PRESENT POSTOFFICE OF MOTHER Campbell S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 19
(Years)

(18) BIRTHPLACE Spartanburg

(19) OCCUPATION Domestic

(21) 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 alive at 6 P. M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) Hannet Moody (25) Address of Physician or Midwife Campbell S.C.

(24) State whether Physician or Midwife Midwife

Given name added from a supplemental report

(26) Witness W. H. Hanna
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filled 11/14 1916 (28) Chas. L. Bester 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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Will obtain information to complete and forward at once

For State Registrar Only
587

No. 126
Local Registrar
..... Ward
..... number.)
yet named, make report as directed

3 1916
(Day) (Year)

W. H. Hanna
26
11/14
1916
Chas. L. Bester