

(1) PLACE OF BIRTH

County of AndersonTownship of BeltonInc. Town of BeltonCity of Belton

(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. 300

30919

Registered No. 142
(For use of Local Registrar)(2) Full Name of Child Wade E. Murphy If child is not yet named, make supplemental report as directed.(a) SEX Male (b) Type Full Term (c) Number in order of birth 1st (d) Date of birth Sept 30 1942
(e) Month 9 (f) Day 30 (g) Year 1942FATHER: (1a) NAME BEFORE MARRIAGE W. E. Murphy (1b) NAME AFTER MARRIAGE W. E. Murphy(1c) PRESENT RESIDENCE OF FATHER Belton SC (1d) PRESENT RESIDENCE OF MOTHER Belton SC(1e) COLOR White (1f) AGE AT LAST BIRTH 24 (1g) COLOR White (1h) AGE AT LAST BIRTH 24(1i) BIRTHPLACE Belton SC (1j) BIRTHPLACE Belton SC(1k) OCCUPATION Teamster (1l) OCCUPATION house wife(1m) Number of children born to mother, including present one 3 (1n) Number of children of this mother now living, including present one 3

CERTIFICATION OF ATTENDING PHYSICIAN OR MIDWIFE

(2a) I hereby certify that I attended the birth of this child, who was alive at 7 M., on the date above stated. (b) (Signature) W. B. Ray (c) Date whether Physician or Midwife Physician(d) Address of Physician or Midwife Belton SC(2b) Witness W. B. Ray (c) Signature of Witness W. B. Ray (d) Address of Witness Belton SC(2c) Local Registrar W. B. Ray(2d) Local Registrar W. B. Ray(2e) Local Registrar W. B. Ray(2f) Local Registrar W. B. Ray(2g) Local Registrar W. B. Ray(2h) Local Registrar W. B. Ray