

(1) PLACE OF BIRTH

County of Laurens
 Township of Waterloo
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
35289

Registration District No. 2907 Registered No. 74
 (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.)

(2) Full Name of Child Ed. Moore MOORE (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Oct 17 1922
 (Date of Month) (Day) (Year)

FATHER <u>MOORE</u>		MOTHER <u>LUCILE</u>	
(8) FULL NAME <u>William H. Moore</u>	(14) NAME BEFORE MARRIAGE <u>Lucile Price</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Waterloo</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Waterloo</u>
(10) COLOR OR RACE <u>Calard</u>	(11) AGE AT LAST BIRTHDAY <u>23</u> (Years)	(16) COLOR OR RACE <u>Calard</u>	(17) AGE AT LAST BIRTHDAY <u>21</u> (Years)
(12) BIRTHPLACE <u>Waterloo</u>	(18) BIRTHPLACE <u>Waterloo</u>	(13) OCCUPATION <u>Public Work</u>	(19) OCCUPATION <u>farm. Domestic</u>
(20) Number of children born to mother, including present birth <u>3</u>	(21) Number of children of this mother now living, including present birth <u>3</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 2 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Siller Hile

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Waterloo 31

Given name added from a supplemental report

(26) Witness G. B. Paul
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Nov 10 1922 F. B. Paul
 Registrar 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.

WRITING PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.