

(1) PLACE OF BIRTH

County of York
Township of Conchester
or
Inc. Town of

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

40013

Registration District No. 1702Registrar No. 46
(For use of Local Registrar)

City of

(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 David C. Platt
(If child is not yet named, make supplemental report as directed)3 SEX OF CHILD Male 4 Twin or Triplet To be answered only in event of Twin or Triplet 5 Number in order of birth 6 Are Parents Married Yes 7 DATE OF BIRTH Oct 24 19 23
(Name of Month) (Day) (Year)

FATHER.

8 FULL NAME John B. Platt
9 PRESENT POSTOFFICE OF FATHER Summersville, S.C.
10 COLOR OR RACE White 11 AGE AT LAST BIRTHDAY 26 (Year)
12 BIRTHPLACE Pawnee, S.C.
13 OCCUPATION Accountant
14 Number of children born to mother, including present birth Four

MOTHER.

14 NAME BEFORE MARRIAGE Ruth Purser Dale
15 PRESENT POSTOFFICE OF MOTHER Summersville, S.C.
16 COLOR OR RACE White 17 AGE AT LAST BIRTHDAY 24 (Year)
18 BIRTHPLACE Lawrence, S.C.
19 OCCUPATION Housewife
20 Number of children of this mother now living, including present birth Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive at 4:04 P.M. on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)(22) (Signature) Chas. D. Thompson(23) State whether Physician or Midwife Physician(24) Address of Physician or Midwife Summersville, S.C.

Given name added from a supplemental report

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

(26) FILED DEC 12 1923 (27) ED. P. L. WATSON
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.

*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.