

(1) PLACE OF BIRTH

County of Orangeburg
 Township of Branchville
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

No. for State Registrar Only
8033

Registration District No. 36.01

Registered No. 9
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child D. V. Wetherly

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

(3) Sex of Child <u>Boy</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>January 23</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>Dr. S. Wetherly</u>			(14) NAME BEFORE MARRIAGE <u>Miss Eugenia Thompson</u>	
(9) PRESENT RESIDENCE OF FATHER <u>Branchville S.C.</u>			(15) PRESENT RESIDENCE OF MOTHER <u>Branchville S.C.</u>	
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>38</u> (Years)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>34</u> (Years)	
(12) BIRTHPLACE <u>Orangeburg Co.</u>			(18) BIRTHPLACE <u>Orangeburg Co.</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Domestic</u>	
(20) Number of children born to mother, including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 2:40 M., on the date above stated. (Hour, M. or P. M.)

(23) (Signature) P. H. Thompson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife
Branchville S.C.

Given name added from a supplemental report

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

(27) April 9, 1923 Preston A. G.
 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.