

11) PLACE OF BIRTH

County of

Township of

Ine. To

City of

(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

File No. — For State Registrar Only

11325

Registered No. 110

(For use of Local Registrar)

(2) Full Name of Child

Chas. N. McNamee

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

(1) SEX

(4) TW or TRIPLE?

(5) NUMBER IN ORDER OF BIRTH

(6) AGE

(7) DATE

BIRTH

(8) FULL NAME

N. J. McNamee

(14) NAME BEFORE MARRIAGE

King Alexander

(9) PRESENT POSTOFFICE OF FATHER

324 E. 1st St. Greenville

(15) PRESENT POSTOFFICE OF MOTHER

Greenville

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

72

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

72

(12) BIRTHPLACE

SC

(18) BIRTHPLACE

Walhalla SC

(13) OCCUPATION

Mill Operator

(19) OCCUPATION

Dom.

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

2

(21) Number of children of this mother now living, including present birth

2

CERTIFICATE OF ATTENDING PHYSICIAN

(22) I hereby certify that I attended the birth of this child, who was on the date above stated:

24

(23) Signature of Physician or Midwife

(24) State of Physician or Midwife

24
Greenville
McNamee

(25) Witness

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

Registrar

1911

(26)

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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