

11 (1) PLACE OF BIRTH

(1) PLACE OF BIRTH

County of Spartanburg
 Township of
 or
 Inc. Town of
 or
 City of Spartburg
 (If birth occur 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
36377

Registration District No. 40 Registered No. 482
 (For use of Local Registrar)

(2) Full Name of Child

(3) BOY OR GIRL BOY (4) Twin or Triplet? No (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH 10 14 22
 (If child is not yet named, make supplemental report as directed)

FATHER

(8) FULL NAME Walter Lee Wilson
 (9) PRESENT POSTOFFICE OF FATHER 119 Clark St. Spartanburg, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)
 (12) BIRTHPLACE Atlanta, Ga.
 (13) OCCUPATION Shipping Clerk
 (20) Number of children born to mother, including present birth 1

MOTHER

(14) NAME BEFORE MARRIAGE Alveta Parnell
 (15) PRESENT POSTOFFICE OF MOTHER 119 Clark St. Spartanburg, S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20 (Years)
 (18) BIRTHPLACE Newberry, S.C.
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Oct. 14 at 7:15 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)
 (23) (Signature) Hester Clark Rife, M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife 156 E. Main - Spartanburg

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 11-1-22 (28) Gas Copes

*When there was no attending physician or midwife, then the father, householder, etc., should make the report. If a child breathes even once, it must not be reported as stillborn. No report is desired of children before the fifth month of pregnancy.

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

RECEIVED BY COLUMBIA, COLUMBIA, S. C.