

(1) PLACE OF BIRTH

County of AikenTownship of Irregularor
City of Irregularville

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

No. 10. - For this Register only
50Registration District No. 2-BRegistered No. 3
(For use of Local Registrar)

(2) Full Name of Child

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

| | | | | |
|---------------------------------|-----------------------------------|--|---|--|
| (2) SEX OF CHILD <u>Male</u> | (3) Type of Trunk <u>Trunk</u> | (4) Number in order of birth <u>1</u> | (5) Is child living at birth? <u>Yes</u> | (6) DATE OF BIRTH <u>Jan 1 1923</u> (Name of Month) (Day) (Year) |
|---------------------------------|-----------------------------------|--|---|--|

FATHER.

(10) FULL NAME Paul Patrick Renner(11) PRESENT RESIDENCE OF FATHER Tranterville S.C.(12) COLOR OR RACE White (13) AGE AT LAST BIRTHDAY 26 (Years)(14) BIRTHPLACE Aiken Co. S.C.(15) OCCUPATION Mill Work(16) Number of children born to mother, including present birth 2

MOTHER.

(10) FULL NAME Paul Janet Renner(11) PRESENT RESIDENCE OF MOTHER Tranterville S.C.(12) COLOR OR RACE White (13) AGE AT LAST BIRTHDAY 30 (Years)(14) BIRTHPLACE Aiken Co. S.C.(15) OCCUPATION Domestic(16) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(20) I hereby certify that I attended the birth of this child, who was Alive at 7 P.M. on the date above stated. (Sign alive or stillborn) (Hour M. or P.M.)(21) (Signature) J. O. Renner, M.D.

(22) State whether Physician or Midwife

(23) Address of Physician or Midwife

Given name added from a supplemental report

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

(25) Filed Jan 10 1923 W. H. Turnbull, R.H.M. 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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W. H. Turnbull