

(1) PLACE OF BIRTH

County of

Lancaster SC

Township of

or

Inc. Town of

or

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

26779

Registration District No.

28A

Registered No.

44

(For use of Local Registrar)

(2) Full Name of Child Ruby Ella McCoy

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

3. BOY OR GIRL

girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

May 28, 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Eugene McCoy

(9) PRESENT POSTOFFICE OF FATHER

Lancaster SC

(10) COLOR OR RACE

Colord

(11) AGE AT LAST BIRTHDAY

23
(Years)

(12) BIRTHPLACE

Lancaster SC

(13) OCCUPATION

Farmers

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

3

MOTHER.

(14) NAME BEFORE MARRIAGE

Katie Gamble

(15) PRESENT POSTOFFICE OF MOTHER

Lancaster SC

(16) COLOR OR RACE

Colord

(17) AGE AT LAST BIRTHDAY

32
(Years)

(18) BIRTHPLACE

Williamburg County

(19) OCCUPATION

House keeper

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

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 9:30 AM, on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Mary J. Witherspoon

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Lancaster SC

Given name added* from a supplemental report

(26) Witness

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

(27) Filed

July 1, 1923

(28)

J. J. Witherspoon

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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