

(1) PLACE OF BIRTH

County of Harvey
 Township of Simps Creek
 or
 Inc. Town of Louis
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

43012

Registration District No. 7509 Registered No. 126
 (For use of Local Registrar)

City of (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

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

| | | | | |
|--|---|------------------------------|---|--|
| (3) BOY OR GIRL <u>Boy</u> | (4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u> | (5) Number in order of birth | (6) Are Parents Married? <u>Yes</u> | (7) DATE OF BIRTH <u>Nov 28 22</u> (Name of Month) (Day) (Year) |
| FATHER. | | | MOTHER. | |
| (8) FULL NAME <u>John Marion Felder</u> | | | (14) NAME BEFORE MARRIAGE <u>Maggie O McMillan</u> | |
| (9) PRESENT POSTOFFICE OF FATHER <u>Louis SC</u> | | | (15) PRESENT POSTOFFICE OF MOTHER <u>Louis SC</u> | |
| (10) COLOR OR RACE <u>White</u> | | | (16) COLOR OR RACE <u>White</u> | |
| (11) AGE AT LAST BIRTHDAY <u>37</u> (Years) | | | (17) AGE AT LAST BIRTHDAY <u>36</u> (Years) | |
| (12) BIRTHPLACE <u>Bamberg Co SC</u> | | | (18) BIRTHPLACE <u>Bamberg Co SC</u> | |
| (13) OCCUPATION <u>Merchant</u> | | | (19) OCCUPATION <u>Housewife</u> | |
| (20) Number of children born to mother, including present birth <u>Two</u> | | | (21) Number of children of this mother now living, including present birth <u>Two</u> | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 1455 M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Thos Richardson(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Louis SC

Given name added from a supplemental report

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

(27) Filed Dec 1 1922 (28) James H. H. H.
 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.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and in question 5, FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

MECAN OF COLUMBIA, S. C.