

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 8.

(1) PLACE OF BIRTH  
County of Lee  
Township of Leuchburg  
or Inc. Town of Leuchburg  
or City of Leuchburg  
(If birth occurs in a hospital or other institution give name of same instead of street and number.)  
Registration District No. 3002 Registered No. 130  
(For use of Local Registrar)  
No. 84 Ward

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

File No.—For State Registrar Only  
**35301**

(2) Full Name of Child Ray Newton Rodgers  
(If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 4 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 7 1922  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Carl Miller Rodgers  
(9) PRESENT POSTOFFICE OF FATHER Leuchburg S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30  
(Year) (12) BIRTHPLACE North Carolina  
(13) OCCUPATION Leuchburgman  
(20) Number of children born to mother, including present birth 4

MOTHER.  
(14) NAME BEFORE MARRIAGE Litaker  
(15) PRESENT POSTOFFICE OF MOTHER Leuchburg S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30  
(Year) (18) BIRTHPLACE North Carolina  
(19) OCCUPATION Domestic  
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.  
(22) I hereby certify that I attended the birth of this child, who was born alive at 3 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. H. Garrison, M.D.  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Leuchburg S.C.

Given name added from a supplemental report  
(26) Witness J. H. Whitcomb  
(Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed 10/14 1922 (28) J. H. Whitcomb  
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.

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