

(1) PLACE OF BIRTH

County of Marion

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

11999

Registration District No. 324Registered No. 28
(For use of Local Registrar)

(2) Full Name of Child

MarianDrumwrightSt. 28 Ward)

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

(3) BOY OR GIRL girl(4) Twin or Triplet? X(5) Number in order of birth X(6) Are Parents Married? yes

(7) DATE OF

BIRTH 4.22 1922
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

Chas. Green Drumwright

(9) PRESENT POSTOFFICE OF FATHER

Marion, S.C.

(10) COLOR OR RACE

white(11) AGE AT LAST BIRTHDAY 41
(Years)

(12) BIRTHPLACE

Durhamville, Tenn.

(13) OCCUPATION

Oil well Supt.

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

2

MOTHER

(14) NAME BEFORE MARRIAGE

Grace Newman

(15) PRESENT POSTOFFICE OF MOTHER

Marion S.C.

(16) COLOR OR RACE

white(17) AGE AT LAST BIRTHDAY 29
(Years)

(18) BIRTHPLACE

Centerville, Miss.

(19) OCCUPATION

Housewife

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

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 1:45 P.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) Emerson D. Ricks(24) State whether Physician or Midwife(25) Address of Physician or Midwife Marion S.C.

(Given name added from a supplemental report)

Lee Affhart4/9/45 L. A. Ricks, M.D.
Registrar

(26) Witness

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

(27) Filed

May 10, 1922

(28)

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.