

## (1) PLACE OF BIRTH

County of FairfieldTownship of 6or  
Inc. Town of ProvidenceCity of Providence

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of HealthNo. 28212 - for State Registrar only

28212

Registration District No. 6 Registered No. 2  
(For use of Local Registrar)(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 Mary Ann Woodward (If child is not yet named, make supplemental report as directed)(3) SEX-OF-CHILD GIRL (4) Twin or Triplet No (5) Number in order of birth 1 (6) DATE OF BIRTH Sept 3 1923  
(Month) (Day) (Year)

## FATHER.

(1) FULL NAME Franklin Woodward(2) PRESENT POSTOFFICE OF FATHER Providence, S.C.(10) COLOR OR RACE Caucasian (11) AGE AT LAST BIRTHDAY 34 (Years)(12) BIRTHPLACE Providence, S.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 1

## MOTHER.

(14) NAME BEFORE MARRIAGE Lucy Howell(15) PRESENT POSTOFFICE OF MOTHER Providence, S.C.(16) COLOR OR RACE Caucasian (17) AGE AT LAST BIRTHDAY 32 (Years)(18) BIRTHPLACE Providence, S.C.(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.(22) (Signature) T. J. Sullivan (23) State whether Physician or Midwife (24) Address of Physician or Midwife

Given name added from a supplemental report

(25) Witness T. J. Sullivan (Signature of Witness necessary only when question 22 is signed by mark)(26) Filed Sept 10 1923 (27) T. J. Sullivan 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.