

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
No. 1.—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 5.
Bureau of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Sumter
Township of Shiloh
or
Inc. Town of.....
or
City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
32476

Registration District No. 4-10.7

Registered No. 83
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child John Isaac Lowrey

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 1 (6) Are Parents Married? No (7) DATE OF BIRTH Sept 21 1912
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Richard Goodman
(9) PRESENT POSTOFFICE OF FATHER Shiloh, S.C.
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 21 (Years)
(12) BIRTHPLACE Sumter Co
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 4

MOTHER.
(14) NAME BEFORE MARRIAGE Rosa Lowrey
(15) PRESENT POSTOFFICE OF MOTHER Shiloh, S.C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 23 (Years)
(18) BIRTHPLACE Sumter Co
(19) OCCUPATION Housewife
(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 Alive at 3 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Emma J. McSpadden
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Esquaburg, Ga.

Given name added from a supplemental report
.....
.....
..... 19 ..
Registrar

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 9-22-12 1912 (28) L. B. McSpadden 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.