

(1) PLACE OF BIRTH

County of SpartanburgTownship of Norfolk

Inc. Town of

City of

2) Full Name of Child Mary Lou Carter { If child is not yet named, make supplemental report as directed(3) SEX girl (4) Twin or triplet? No. (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE BIRTH May 9 1911 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Alexander T. Carter(9) PRESENT POSTOFFICE OF FATHER Norfolk - S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 46 (Years)(12) BIRTHPLACE Parson N.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Louise Butler(15) PRESENT POSTOFFICE OF MOTHER Norfolk - S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31 (Years)(18) BIRTHPLACE Norfolk S.C.(19) OCCUPATION Housewife(20) 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 alive at 10 P.M., (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.(23) (Signature) T. E. Howell(24) State whether Physician or Midwife Mid. (25) Address of Physician or Midwife Norfolk - S.C.

Given name added from a supplemental report

1911

Registrar

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

(27) Filed Jan 10 1911 (28) M. H. Kasper 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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