

FOR EACH CHILD, AND MARK THE
FIRST-BORN. No. 1. THE OTHER, No. 2, etc. In question 2
LOCAL OF COLUMBIA, No. 2.

(1) PLACE OF BIRTH

County of Charlottesville
Township of Charlottesville
OF
Inc. Town of Drayton
OF
City of 4

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only
8500

Registration District No. 4008

Registered No. 4008
(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 Florie Morgan

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Feb 20 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Eugene Morgan
(9) PRESENT POSTOFFICE OF FATHER Drayton SC
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 33
(Year) (12) BIRTHPLACE NC
(13) OCCUPATION cotton mill operator
(14) Number of children born to mother, including present birth 4

MOTHER.

(15) NAME BEFORE MARRIAGE Corie Lavender
(16) PRESENT POSTOFFICE OF MOTHER Drayton SC
(17) COLOR OR RACE white (18) AGE AT LAST BIRTHDAY 26
(Year) (19) BIRTHPLACE SC
(20) OCCUPATION Housewife
(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 alive at 9:00 M., on the date above stated.
(Normal live or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. H. Chapman
(24) State whether Physician or Midwife Phys (25) Address of Physician or Midwife Whiting SC

Given name added from a supplemental report

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

(27) Filed Mar. 15 1923 (28) Mr. C. F. Parker 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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