

Form No. 1

(1) PLACE OF BIRTH.

County of Richmond
 Township of Richmond
 or
 Inc. Town of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

Department of Health

Registration District No. 1702

File No. — For State Registrar Only

17472

Registered No. 20
(For use of Local Registrar)

City of (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 in name If child is not yet named, make supplemental report as directed

3) BOY OR GIRL girl 4) Twin or Triplet 5) Number in order of birth 9 6) Are Parents Married? Yes 7) DATE OF BIRTH Feb 25 1923
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Richard Simon9) PRESENT POSTOFFICE OF FATHER Sumnerville10) COLOR OR RACE Caucasian 11) AGE AT LAST BIRTHDAY 41 (Year)12) BIRTHPLACE Richmond, S.C.13) OCCUPATION Farmer14) Number of children born to mother, including present birth 9

MOTHER.

14) NAME BEFORE MARRIAGE Opelle Lowmeyer15) PRESENT POSTOFFICE OF MOTHER Ridgeway, S.C.16) COLOR OR RACE Caucasian 17) AGE AT LAST BIRTHDAY 41 (Year)18) BIRTHPLACE Richmond, S.C.19) OCCUPATION Farmer20) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was A. Low at 4:30 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Richard T. Rimer (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Richmond, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mother) W. H. Johnston
 (27) Filed July 9 1923 (28) W. H. Johnston 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.