

(1) PLACE OF BIRTH

County of Lancaster
 Township of Phasant Hill
 OF
 Inc. Town of
 OF
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

43210

Registration District No. 1286 Registered No. 156
 (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 Eugene Hodges (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 Oct 29 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME George Allen Hodges
 (9) PRESENT POSTOFFICE OF FATHER Denmark S C
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 43
 (Years)
 (12) BIRTHPLACE Colleton Co
 (13) OCCUPATION Lumber Business
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Ruth Reeves
 (15) PRESENT POSTOFFICE OF MOTHER Denmark S C
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24
 (Years)
 (18) BIRTHPLACE Lancaster Co
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 6 P.M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) L. V. Bishop
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Heath Springs S. C.

Given name added from a supplemental report

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

(27) Filed Jan 6 19 23 (28) E. F. Hammond
 Registrar 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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MADE IN COLUMBIA, COLUMBIA, S. C.