

(1) PLACE OF BIRTH

County of Wm. burg  
Township of Permit  
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  
**3798C**

Registration District No. 4308 Registered No. 93  
(For use of Local Registrar)

(No. .... St.)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Lillie McDowell If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? To be answered only in event of Twin or Triplet (5) Are Parents Married? Yes (6) DATE OF BIRTH Nov. 10 1923  
(Name of Month) (Day) (Year)

FATHER.  
(7) FULL NAME John McDowell  
(8) PRESENT POSTOFFICE OF FATHER Lanes - S.C.  
(9) COLOR OR RACE negro (10) BIRTHPLACE Wm. burg co. S.C.  
(11) AGE AT LAST BIRTHDAY 28 (Year)  
(12) OCCUPATION Farmer  
(13) Number of children born to mother, including present birth 3

MOTHER.  
(14) NAME BEFORE MARRIAGE Sarah McRant  
(15) PRESENT POSTOFFICE OF MOTHER Lanes - S.C.  
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 21 (Year)  
(18) BIRTHPLACE Wm. burg co. S.C.  
(19) OCCUPATION Farm laborer  
(20) 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 Born alive at 3 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sarah J. Dozier (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Lanes - S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) AK Wm. burg  
(27) Filed Nov. 13<sup>th</sup> 1923 (28) 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.