

(1) PLACE OF BIRTH

County of Abbeville.....Township of Abbeville....

Inc. Town of.....

City of Abbeville.....

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 1 A Registered No. 2000
(For use of Local Registrar)(No. 60 Ferry.....St. 4.....Ward)(2) Full Name of Child Dorothy Hoytt Crenshaw

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) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Jan. 31, 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Hoytt Crenshaw

(9) PRESENT POSTOFFICE OF FATHER

Abbeville S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

23
(Years)

(12) BIRTHPLACE

Monroe Co. N.C.

(13) OCCUPATION

R.R. Track Man

(20) Number of children born to mother, including present birth

2

MOTHER.

(14) NAME BEFORE MARRIAGE Mamie Lucile Martin(15) PRESENT POSTOFFICE OF MOTHER Abbeville S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

22
(Years)

(18) BIRTHPLACE

Elbert Co. Ga.

(19) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was... Alive... 7... at... A. M....
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) C.O. Gambrell

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife
Abbeville 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 Feb. 5, 1923(28) W. C. Walker
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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McGraw