

## (1) PLACE OF BIRTH

County of Anderson S.C.Township of Antwerpor  
Inc. Town of Countryor  
City of Anderson(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 Theodore ~~ADGERS~~ ADGERS

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

single

(5) Number in order of birth

To be answered only in event of Twins or Triplets

(6) Are Parents Married?

single

(7) DATE OF

BIRTH

Nov 23, 1922

(Name of Month) (Day) (Year)

## MOTHER.

(14) NAME BEFORE MARRIAGE

Willie Mae Adgers

(15) PRESENT POSTOFFICE OF MOTHER

Anderson S.C.

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

10-1922  
(Years)

(18) BIRTHPLACE

(19) OCCUPATION

Housewife

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

One

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

Willie Adgers  
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed NOV 30 1922

(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.