

(1) PLACE OF BIRTH

County of York
 Township of Fort Mill
 or
 Inc. Town of
 or
 City of (No. St. Ward)

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
9540

Registration District No. 4406 Registered No. 18
 (For use of Local Registrar)

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

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

(3) SEX OR GIRL? Girl (4) Twin or Triplet? - (5) Number in order of birth - (6) Are Parents Married? Yes (7) DATE OF BIRTH Mar. 15, 1922
 (Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Linn Jennings
 (9) PRESENT POSTOFFICE OF FATHER Fort Mill S.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 40 (Years)
 (12) BIRTHPLACE S. C.
 (13) OCCUPATION Farm Laborer
 (14) Number of children born to mother, including present birth 8

MOTHER

(14) NAME BEFORE MARRIAGE Lula Williams
 (15) PRESENT POSTOFFICE OF MOTHER Fort Mill S.C.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 40 (Years)
 (18) BIRTHPLACE S. C.
 (19) OCCUPATION Domestic
 (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 alive at 5:21 M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Flora Sutton

(24) Please, whether Physician or Midwife

(25) Address of Physician or Midwife

midwife Fort Mill S.C.

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Date 3/15/22(28) A. H. Parker

(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.