

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.
 Made at Columbia, S. C.

(1) PLACE OF BIRTH

County of Conner
 Township of Myrtle
 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

4783

Registration District No. 3, 2, 6 Registered No. 1, 0
 (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 Lolis Dread If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (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 Feb 2, 1923
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Benjamin Dread
 (9) PRESENT POSTOFFICE OF FATHER Walhalla
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26 (Year)
 (12) BIRTHPLACE Conner
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 4

MOTHER.
 (14) NAME BEFORE MARRIAGE Lusa Sims
 (15) PRESENT POSTOFFICE OF MOTHER Walhalla
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24 (Year)
 (18) BIRTHPLACE Conner
 (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 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Trines Howard (24) State whether Physician or Midwife (25) Address of Physician or Midwife Walhalla

Given name added from a supplemental report

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

(27) Filed Feb 23, 1923 (28) R. H. Miles 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.