

(1) PLACE OF BIRTH

County of Anderson
 Township of Martins
 or Town of
 or City of

CERTIFICATE OF BIRTH

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

No. for this Register Only
12839

Registration District No. 309 Registered No. 17
 (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 Harper Power If child is not yet named, make supplemental report as directed

(3) SEX 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? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan 16 1923</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Dock Power</u>			(14) NAME BEFORE MARRIAGE <u>Ernie Shaw</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Belton</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Belton</u>	
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>44</u> (Year)	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>35</u> (Year)	
(12) BIRTHPLACE <u>Lab</u>			(18) BIRTHPLACE <u>to</u>	
(13) OCCUPATION <u>Farming</u>			(19) OCCUPATION <u>Housewife</u>	
(20) Number of children born to mother, including present birth <u>9</u>			(21) Number of children of this mother now living, including present birth <u>5</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was at 5 A. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Ernie Shaw
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Belton - S

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

(27) Filed June 20 1923 R. P. R. Local Registrar

Given name added from a supplemental report

*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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11/10/23 (Lab) #4