

(1) PLACE OF BIRTH

County of Charleston

Township of

or

Inc. Town of

or

City of Charleston

(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

File No. - For State Registrar Only

3190

Registration District No. 9A Registered No. 286
(For use of Local Registrar)(No. 76 Conning St.) Ward)(2) Full Name of Child Marion Frances Wright If child is not yet named, make supplemental report as directed(3) SEX OR GROWTH Boy (4) Twin or Triplet 1 (5) Number in order of birth 1 (6) Are Parents Married yes (7) DATE OF BIRTH Feb 7 1928
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Luder Marion Wright (14) NAME BEFORE MARRIAGE Kathleen Groome(9) PRESENT POSTOFFICE OF FATHER Charleston S.C. (15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 yrs (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 yrs(12) BIRTHPLACE Andrews S.C. (18) BIRTHPLACE Berkley Co.(13) OCCUPATION Fireman (C.F.D.) (19) OCCUPATION Domestic(20) Number of children born to mother, including present birth 4 incl. (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 10:30 P.M. on the date Feb 7 1928
(Born alive or stillborn) Hour A. M. or P. M.(23) (Signature) J. P. Dancer M.D. (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife 116 Broad St.

Given name added from a supplemental report

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

(27) Filed 7 13 1928 Merced L. L. L. 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.