

No. 1.

(1) PLACE OF BIRTH

County of Lancaster
 Township of Buford
 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

43144

Registration District No. 2800Registered No. 85
(For use of Local Registrar)

(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 Crowler Parker If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? twin (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Dec. 19, 22
 (Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <u>Pink Parker</u>	(14) NAME BEFORE MARRIAGE <u>Statie Dawkins</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Lancaster S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Lancaster S.C.</u>
(10) COLOR OR RACE <u>Colord</u>	(11) AGE AT LAST BIRTHDAY <u>24</u> (Years)	(16) COLOR OR RACE <u>Colord</u>	(17) AGE AT LAST BIRTHDAY <u>26</u> (Years)
(12) BIRTHPLACE	(18) BIRTHPLACE	(19) OCCUPATION <u>Farming</u>	(20) OCCUPATION <u>Farming</u>
(21) Number of children born to mother, including present birth <u>4</u>	(22) Number of children of this mother now living, including present birth <u>4</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 3 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rachel Duren
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Lancaster S.C. R. 727 1/2

Given name added from a supplemental report

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

(27) Filed Jan. 3, 1923 (28) A. M. Hanson
 Registrar 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.