

MARGIN 1. SEE 3D FOR BINDING.
 WRITE PLAINLY, WITH UNFOLDED SHEET. THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS USE SEPARATE BLANK FOR EACH CHILD, and mark the
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 DEPARTMENT OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Oconee
 Township of Keowee
 OR
 Inc. Town of Salem
 OR
 City of

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

File No.—For State Registrar Only
43884

Registration District No. 42 Registered No. 99
 (For use of Local Registrar)

City of (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 Edith Alice Lee Rodgers If child is not yet named, make supplemental report as directed

(3) SEX OR GIRL? <u>Girl</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Jan 7 1922</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME George Rodgers

(9) PRESENT POSTOFFICE OF FATHER Salem S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 18 (Years)

(12) BIRTHPLACE Salem S.C.

(13) OCCUPATION farming

(20) Number of children born to mother, including present birth one

MOTHER.

(14) NAME BEFORE MARRIAGE Opheelia Brewer

(15) PRESENT POSTOFFICE OF MOTHER Salem S.C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 15 (Years)

(18) BIRTHPLACE Anderson S.C.

(19) OCCUPATION house keeping

(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 alive at 10 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Malinda Wilson
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Salem S.C.

Given name added from a supplemental report

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

(27) Filed 1/16 1922. (28) P. L. Green
 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.