

(1) PLACE OF BIRTH

County of Newbury  
Township of # 4  
or  
Inc. Town of Whitman  
or  
City of .....

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

File No.—For State Registrar Only  
**31399**

Registration District No. 3402 Registered No. 103  
(For use of Local Registrar)

(2) Full Name of Child Louis W. Perry Jr. (No. .... St.; .... Ward)  
If child is not yet named, make supplemental report as directed.

3 SEX OF CHILD Boy 4 Twin or Triplet? No 5 Number in order of birth 1 6 Are Parents Married? Yes 7 DATE OF BIRTH Sept 30 22  
(Name, Month, Day, Year)

FATHER.  
8 FULL NAME Louis W. Perry  
9 PRESENT POSTOFFICE OF FATHER Whitman SC  
10 COLOR OR RACE Black 11 AGE AT LAST BIRTHDAY 22  
(Year)

12 BIRTHPLACE Me.  
13 OCCUPATION Farmer

14 Number of children born to mother, including present birth 1

MOTHER.  
14 NAME BEFORE MARRIAGE Marie Lepler  
15 PRESENT POSTOFFICE OF MOTHER Whitman SC  
16 COLOR OR RACE Black 17 AGE AT LAST BIRTHDAY 20  
(Year)

18 BIRTHPLACE Newbury Co  
19 OCCUPATION Domestic

20 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 .... at 6 P.M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Patty Sniffen  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Whitman SC

Given name added from a supplemental report

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

(27) Filed Oct 2 1922 (28) R.M. Duckett  
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.