

(1) PLACE OF BIRTH

County of

Spartanburg
Facolt

Township of

or

Inc. Town of

or

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

Florence Elizabeth Maddell

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

(3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH 9 12 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

R. L. Maddell

(9) PRESENT POSTOFFICE OF FATHER

Trough S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

33
(Year)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Millwork

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

4

MOTHER.

(14) NAME BEFORE MARRIAGE

Nettie Petty

(15) PRESENT POSTOFFICE OF MOTHER

Trough S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

34
(Year)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Housewife

(20) Number of children of this mother now living, including present birth

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was

at 11:00 A.M.
(Born alive or stillborn) (Hour A. M. or P. M.)

on the date above stated.

(23) (Signature)

M. L. Kippel

(24) State whether

Physician or Midwife

(25) Address of Physician or Midwife

M. D. Facolt S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Oct. 1, 1922 (28) M. U. Brown
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.

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STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

32295

Registration District No. 4006

Registered No. 127
(For use of Local Registrar)

(No. St.; Ward)

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