

In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the MEDAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH Laurens
 County of Laurens
 Township of Gills Creek
 Inc. Town of _____
 or _____
 City of _____
 (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
15527

Registration District No. 2804 Registered No. 90
 (For use of Local Registrar)

(2) Full Name of Child William Michael Lowery

(3) BOY OR GIRLS Boy (4) Twin or Triplet? _____ (5) Number in order of birth _____ (6) Are Parents Married? Yes (7) DATE OF BIRTH March 2
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME T. C. Lowery
 (9) PRESENT POSTOFFICE OF FATHER Laurens S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 43
 (12) BIRTHPLACE Chesterfield Co.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Mabel Benson
 (15) PRESENT POSTOFFICE OF MOTHER Laurens S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31
 (18) BIRTHPLACE Chester S.C.
 (19) OCCUPATION House wife

(20) Number of children born to mother, including present birth 6 (21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) Signature [Signature] (24) State whether Physician or Midwife _____ (25) Address of Physician or Midwife Chesterfield, Laurens 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 6-12-20 (28) [Signature] 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.