

WHEN PLAINLY, WITH UNPAINING EFFORTS, THIS IS A PRELIMINARY RECORD  
N. M.—In case of twins or triplets use a SEPARATE BLANK FOR EACH CHILD, and mark the  
FIRST-BORN, No. 1, THIRD CHILD, No. 3, etc. In question 6  
Record of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Spartanburg  
Township of Bush Springs  
or  
Inc. Town of .....  
or  
City of 1

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

File No.—For State Registrar Only  
**2478**

Registration District No. Hood Registered No. 2  
(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 Alvin D. Bowers If child is not yet named, make supplemental report as directed

3. BOY OR GIRL <u>Boy</u>	4. Twin or Triplet? To be answered only in case of Twins or Triplets	5. Number in order of birth <u>1</u>	6. Are Parents Married? <u>Yes</u>	7. DATE OF BIRTH <u>June 14, 1922</u> (Type of Month) (Day) (Year)
------------------------------	---	---	---------------------------------------	--

FATHER.

8. FULL NAME Levi Bowers  
9. PRESENT POSTOFFICE OF FATHER Green S.C.  
10. COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 39 (Years)  
12. BIRTHPLACE Cornwallville S.C.  
13. OCCUPATION Farmer  
20. Number of children born to mother, including present birth 7

MOTHER.

14. NAME BEFORE MARRIAGE Margaret J. Reid  
15. PRESENT POSTOFFICE OF MOTHER Green S.C.  
16. COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 36 (Years)  
18. BIRTHPLACE Spartanburg S.C.  
19. OCCUPATION Housewife  
21. Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive, at 2 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. R. Banzard  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report.

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

(27) Filed Jan 20, 1922 (28) J. C. Bowers 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.