

Form No. 3

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Smith
 or
 Inc. Town of.....
 or
 City of..... (No. St.; Ward)

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

File No. — For State Registrar Only
5350

Registration District No. 4-107 Registered No. 2
 (For use of Local Registrar)

(2) Full Name of Child Lottie Bell Couvers (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Feb 6 1923
 To be answered only in case of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Sam Couvers
 (9) PRESENT POSTOFFICE OF FATHER Shiloh, S.C.
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 33 (Years)
 (12) BIRTHPLACE Spartanburg Co
 (13) OCCUPATION Farming
 (14) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Queen Couvers
 (15) PRESENT POSTOFFICE OF MOTHER Shiloh, S.C.
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28 (Years)
 (18) BIRTHPLACE Spartanburg Co
 (19) OCCUPATION Housework
 (20) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was Alive at 10:00 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) Margaret McNight
 (23) State whether Physician or Midwife Midwife (24) Location of Physician or Midwife Shiloh, S.C.

(Given name added from a supplemental report)

(25) Witness (Signature of Witness necessary only when question 23 is signed) S. B. McQueen

(27) Filed 2-17 1923 (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.

MARRIAGE REGISTERS AND BIRTH RECORDS. THESE PLAINLY WITH UNPAID REGISTRATION FEE. A FURNISHMENT RECORD. IN B.—to care of children and triplets and separate placard for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc. in question 2.