

NAME PRINTED FOR RECORD  
 WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
 N. B.—In case of TWINS or TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 3.

(1) PLACE OF BIRTH

County of Clarendon  
 Township of Calvary  
 or  
 Inc. Town of .....  
 or  
 City of ..... (No. ....)

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

3731

Registration District No. 1301

Registered No. 5  
(For use of Local Registrar)

(2) Full Name of Child

Rouland Clayton Loucheaux named, make (supplemental report as directed)

(3) BOY OR GIRL? Boy

(4) Twin or Triplet? To be answered only in case of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH May 1, 1922  
(Name) (Month) (Day) (Year)

FATHER.

(8) FULL NAME Edmund Jackson Loucheaux

(9) PRESENT POSTOFFICE OF FATHER Parkville, Mo.

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 43 (Years)

(12) BIRTHPLACE Mo.

(13) OCCUPATION Fanner

(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Virginia Riggs

(15) PRESENT POSTOFFICE OF MOTHER Parkville, Mo.

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 32 (Years)

(18) BIRTHPLACE Mo.

(19) OCCUPATION Housewife

(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 alive at 1:45 P. M., on the date above stated. (Hour) (Minute) (P. M.)

(23) (Signature) Wm. E. Johnson

(24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife Parkville, Mo.

Given name added from a supplemental report

(26) Witness

Signature of Witness necessary only when question 23 is signed by mother

(27) Filed May 1, 1922

(28) Local Registrar C. T. Shifflet

\*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.