

## (1) PLACE OF BIRTH

County of Marlboro  
 Township of Red Hill  
 or  
 Inc. Town of .....

## CERTIFICATE OF BIRTH

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

No. 21905 For State Registrar Only

Registration District No. .... Registered No. 32  
 (For use of Local Registrar)

City of ..... (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 Joseph Edward If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD Boy (4) Twin or Triplet? No (5) Number in order of birth 1st (6) Age Parents Married Yes (7) DATE OF BIRTH July 20, 1923  
 To be answered only in event of Twin or Triplet (Month of Year) (Day) (Year)

## FATHER.

(8) FULL NAME Les Shouder

(9) PRESENT POSTOFFICE OF FATHER Bismuthville S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 39  
 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION City Mill Operator

(14) Number of children born to mother, including present birth 6

## MOTHER.

(14) NAME BEFORE MARRIAGE Dora Lee Davis

(15) PRESENT POSTOFFICE OF MOTHER Bismuthville S.C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 34  
 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION H.W.

(20) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Born alive at 6 P.M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) Thos H Smith M.D.  
 (23) State whether Physician or Midwife (24) Address of Physician or Midwife Bismuthville S.C.

Given name added from a supplemental report

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

(26) Filed Aug. 10, 1923 (27) 1011 E. 1st St. 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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