

(1) PLACE OF BIRTH

County of Charleston
Township of
or
Inc. Town of
or
City of Charleston

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

File No.—For State Registrar Only
25076

Registration District No. 9A Registered No. 1132
(For use of Local Registrar)

(No. 287 St. Phil 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 Dolores Gertrude Dixon (If child is not yet named, make supplemental report as directed)

3) BOY OR GIRL? Girl (4) Twin or Triplet? (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Aug. 11, 1922
(Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Daniel Robert Dixon
9) PRESENT POSTOFFICE OF FATHER Charleston S.C.
10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 19 (Years)
12) BIRTHPLACE S.C.
13) OCCUPATION Book-keeper

MOTHER.

14) NAME BEFORE MARRIAGE Ellie Gertrude Westendorff
15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.
16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 17 (Years)
18) BIRTHPLACE S.C.
19) OCCUPATION Domestic

20) Number of children born to mother, including present birth 2

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11:20 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. F. Price - M.D.

(24) State whether Physician or Midwife P

(25) Address of Physician or Midwife 248 Calhoun St

Given name added from a supplemental report
L. A. Piser, M.D.
9/17/22 19 22 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mother) J. M. ...

(27) Filed 8/12 19 22 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.