

FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of D. Jones
 Township of Whitewater
 or
 Inc. Town of.....
 or
 City of

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

File No.—For State Registrar Only
43926

Registration District No. 350 Registered No. 12
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Dora Matilda Lowe (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec 21, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Mariette Lowe

(9) PRESENT POSTOFFICE OF FATHER Salem

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 44
(Years)

(12) BIRTHPLACE North Carolina

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 16

MOTHER.

(14) NAME BEFORE MARRIAGE Hattie Cantrell

(15) PRESENT POSTOFFICE OF MOTHER Salem

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 39
(Years)

(18) BIRTHPLACE Georgia

(19) OCCUPATION Housework

(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Caroline Reed
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Salem

Given name added from a supplemental report

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

(27) Filed Dec 23, 1922 (28) R.W. Burgess
 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.

McCOMB OF COLUMBIA, COLUMBIA, S. C.