

(1) PLACE OF BIRTH

County of Dorchester
 Township of Northville
 OF
 Inc. Town of
 OF
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

852

Registration District No. 1602Registered No. 2
(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 Mary L. Roddy If child is not yet named, make supplemental report as directed.(3) SEX—
GIRL(4) Twin
or Triplet?(5) Number in
order of birth(6) Are
Parents
Married?(7) DATE OF
BIRTHJune 14, 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME (H. L.) Roddy(9) PRESENT
POSTOFFICE
OF FATHER Northville SC(10) COLOR
OR
RACE White (11) AGE AT LAST
BIRTHDAY 31
(Year)(12) BIRTHPLACE Forsyth Co. Ga.(13) OCCUPATION
Automobile Mechanic(20) Number of children born to
mother, including present birth 4

MOTHER.

(14) NAME BEFORE
MARRIAGE Irene Bayley(15) PRESENT
POSTOFFICE
OF MOTHER Northville SC(16) COLOR
OR
RACE White (17) AGE AT LAST
BIRTHDAY 25
(Year)(18) BIRTHPLACE Williamsburg Co. S.C.(19) OCCUPATION
House wife(21) Number of children of this mother
now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born alive at 5:15 A.M.,
on the date above stated. (Born alive or stillborn) Hour, M. or P. M.)(23) (Signature) S. Beckham

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplement-
tal report(26) Witness (Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed July 5, 1923 (28) W. B. Cooper
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.

FIRST-BORN, No. 1 THE OTHER, No. 2, etc., in question 8.
 Bureau of Columbia, Columbia, S. C.