

Form No. 3

## (1) PLACE OF BIRTH

County of Orangeburg  
 Township of Princeton  
 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

31712

Registration District No. 0614 Registered No. 109  
 (For use of Local Registrar)

(No. .... St.; .... Ward)  
 (If birth occurs in a hospital or other institutions give name of same instead of street and number.)

(2) Full Name of Child A. C. Rush (If child is not yet named, make supplemental report as directed)

3 BOY OR GIRL boy 4 Twin or Triplet? No 5 Number in order of birth 1 6 Are Parents Married? yes 7 DATE OF BIRTH Feb 19 1922  
 (Name of Month) (Day) (Year)

FATHER		MOTHER	
8 FULL NAME <u>Lonnie Rush</u>	14 NAME BEFORE MARRIAGE <u>Pilly Fogle</u>	15 PRESENT POSTOFFICE OF FATHER <u>Bowman, S.C.</u>	15 PRESENT POSTOFFICE OF MOTHER <u>Elmore, S.C.</u>
9 PRESENT POSTOFFICE OF FATHER <u>Bowman, S.C.</u>	16 COLOR OR RACE <u>colored</u>	17 AGE AT LAST BIRTHDAY <u>18</u>	17 AGE AT LAST BIRTHDAY <u>18</u>
10 COLOR OR RACE <u>colored</u>	18 BIRTHPLACE <u>Orangeburg County</u>	18 BIRTHPLACE <u>Orangeburg County</u>	18 BIRTHPLACE <u>Orangeburg County</u>
12 BIRTHPLACE <u>Orangeburg County</u>	19 OCCUPATION <u>Housekeeping</u>	19 OCCUPATION <u>Housekeeping</u>	19 OCCUPATION <u>Housekeeping</u>
13 OCCUPATION <u>Farming</u>	20 Number of children born to mother, including present birth <u>12</u>	20 Number of children born to mother, including present birth <u>12</u>	20 Number of children born to mother, including present birth <u>12</u>

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature)

(24) State, whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Sept 10 1922 (28) D. H. D. 1017 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.

MADE IN COLUMBIA, COLUMBIA, S. C.