CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
31275

(1) PLACE OF BIRTH
County of Marlboro
Township of Adamsville
or
Inc. Town of .....
or
City of .....
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 3300 Registered No. 44
(For use of Local Registrar)
(No. ..... St.; ..... Ward)

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

(3) BOY OR GIRL? Boy
(4) Twin or Triplet? ✓
(5) Number in order of birth —
To be answered only in event of Twins or Triplets
(6) Are Parents Married?
(7) DATE OF BIRTH Sept 6 1925 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME Roach Lowe	(14) NAME BEFORE MARRIAGE Drucilla Dorris
(9) PRESENT POSTOFFICE OF FATHER Bennettsville S.C.	(15) PRESENT POSTOFFICE OF MOTHER Bennettsville S C
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY ..... (Years)	(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY ..... (Years)
(12) BIRTHPLACE Marlboro Co.	(18) BIRTHPLACE Marlboro Co
(13) OCCUPATION Farming	(19) OCCUPATION Farm Labor
(20) Number of children born to mother, including present birth 9	(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 (Born alive or stillborn) at 4 P. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Amand Wall
(24) State whether Physician or Midwife Midwife
(25) Address of Physician or Midwife

Given name added from a supplemental report
.....
..... 19 ....
Registrar

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

(27) Filed 10/10 1922 (28) A. L. Newton
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.

McCaw of Columbia, Columbia S. C. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.