Form No. 3

(1) PLACE OF BIRTH

County of Colleton

Township of Verdier

or

Inc. Town of Walterboro

or

City of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only 29777

Registration District No. 1409 Registered No. 11 (For use of Local Registrar)

(No. ..... 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 _____ {If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
Girl	+	6	yes	Sept 14, 1922 (Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER.	MOTHER.
(8) FULL NAME Henry O'Quinn	(14) NAME BEFORE MARRIAGE Lottie Pye
(9) PRESENT POSTOFFICE OF FATHER Walterboro S.C.	(15) PRESENT POSTOFFICE OF MOTHER Walterboro S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 45 (Years)	(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30 (Years)
(12) BIRTHPLACE S.C.	(18) BIRTHPLACE S.C.
(13) OCCUPATION Farmer	(19) OCCUPATION Cook
(20) Number of children born to mother, including present birth 6	(21) Number of children of this mother now living, including present birth 6

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 A. M. or P. M.)

(23) (Signature) S L Turner

(24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife Walterboro S.C.

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 Oct 9th 1922 (28) Bunsen Padgett
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.