

(1) PLACE OF BIRTH

County of LexingtonTownship of CongareeInc. Town of NorthbrookCity of Northbrook

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

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

83030

Registration District No. 31.0.3Registered No. 112
(For use of Local Registrar)(2) Full Name of Child Louisia V. Marchant Jr.

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Type or Token one (5) Number in order of birth one (6) Are Parents Married yes (7) DATE OF BIRTH Sept 19 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME L. V. Marchant(9) PRESENT POSTOFFICE OF FATHER Northbrook(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27
(Year)(12) BIRTHPLACE SC(13) OCCUPATION Public Works(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Robie E. Hooper(15) PRESENT POSTOFFICE OF MOTHER Northbrook(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 31
(Year)(18) BIRTHPLACE SC(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive at 1 P. M. on the date above stated.
(Born alive or stillborn) (Hour, M. or P. M.)(23) (Signature) W. A. Hooper

(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 Oct 10 1923 by J. C. Ray 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 required of stillbirths before the fifth month of pregnancy.

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