

Form No. 1

(1) PLACE OF BIRTH

County of Lee
Township of Bishopville
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
43362

Registration District No. 2000 Registered No. 70
(For use of Local Registrar)

(2) Full Name of Child Theodore Roosevelt Windom
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(No.St.;Ward)
(Supplemental report as directed)

3) BOY OR GIRL? Girl 4) Twin or Triplet? No 5) Number in order of birth 1 6) Are Parents Married? Yes 7) DATE OF BIRTH Dec 20, 1922
(Name of Month) (Day) (Year)

FATHER.
8) FULL NAME Carol Windom
9) PRESENT POSTOFFICE OF FATHER Bishopville S.C.
10) COLOR OR RACE W 11) AGE AT LAST BIRTHDAY 21
(Years)
12) BIRTHPLACE Lee Co
13) OCCUPATION Day Labor
20) Number of children born to mother, including present birth 2

MOTHER.
14) NAME BEFORE MARRIAGE Nettie Champagne
15) PRESENT POSTOFFICE OF MOTHER Bishopville S.C.
16) COLOR OR RACE W 17) AGE AT LAST BIRTHDAY 20
(Years)
18) BIRTHPLACE Lee Co
19) OCCUPATION Domestic
21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at 5 A.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) Jessie Franklin
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Bishopville S.C.

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

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Jan 1, 1923 (28) Mar. H. J. Laney
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.

REG. OF TOWNS OR TRIPLETS. SEE SEPARATE BLANK FOR EACH CHILD. IN QUESTION 5 FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 5. REG. OF COLUMBIA, COLUMBIA, S. C.