

(1) PLACE OF BIRTH

County of Chesterfield STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 Township of CH State Board of Health

File No.—For State Registrar Only
3683

Inc. Town of Registration District No. 1203 Registered No. 19
 or (For use of Local Registrar)
 or (No. St.; Ward)
 City of (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(3) BOY OR GIRL? Girl Twin or Triplet? No (5) Number in order of birth
 To be answered only in case of twins or triplets

(6) Are Parents Married? no (7) DATE OF BIRTH Feb. 3 1912
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE (11) AGE AT LAST BIRTHDAY (Years)

(12) BIRTHPLACE

(13) OCCUPATION

(16) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Francis Campbell

(15) PRESENT POSTOFFICE OF MOTHER Chesterfield S.C.

(16) COLOR OR RACE color (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Chesterfield Co.

(19) OCCUPATION Farming

(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 alive at 400 P.M.,
 on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) M. S. Watson (24) State whether Physician or Midwife

(25) Address of Physician or Midwife Mid.

Given name added from a supplemental report

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

(27) Filed Mar. 9 1912 (28) M. S. Watson 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.

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RECORD—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.