

(1) PLACE OF BIRTH

County of NewberryTownship of No. 1or
Inc. Town ofor
City of(No. St.; Ward)
(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

20458

Registration District No. 3408 Registered No. 53
(For use of Local Registrar)(2) Full Name of Child Lucy Marie Rogers

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

(3) BOY OR GIRL
Girl(4) Twin or Triplet?
To be answered only in event of Twin or Triplet

(5) Number in order of birth

(6) Parents Married?
Yes(7) DATE OF BIRTH Sept 12, 1923
(Month) (Day) (Year)

FATHER.

(8) FULL NAME Eldredge B. Rogers(9) PRESENT POSTOFFICE OF FATHER Newberry S.C. R# 2(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 48
(Year)(12) BIRTHPLACE Newberry Co. S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 17(14) NAME BEFORE MARRIAGE Maggie Ann Brooks(15) PRESENT POSTOFFICE OF MOTHER Newberry S.C. R# 2(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 38
(Year)(18) BIRTHPLACE Newberry Co. S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 17

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 12:25 M., on the date above stated. (Sign alive or stillborn) (Hour, M. or P. M.)(23) (Signature) E. H. Moore(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Newberry S.C.

Given name added from a supplemental report

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

(27) Filed Oct 5, 1923

(28)

(29) S. J. Cunningham 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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