

MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
 PRINT-HOLE, No. 1, THE OTHER, No. 2, etc., in question 6.

(1) PLACE OF BIRTH

County of Spokane
 Township of S. P. Fowler
 or
 Inc. Town of
 or
 City of Spokane

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
32382

Registration District No. 4008 Registered No. 342
 (For use of Local Registrar)

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

(2) Full Name of Child Stenson Wilson Fowler (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth — (6) Are Parents Married? No (7) DATE OF BIRTH Sept 16, 22
 (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Stenson Fowler Sr.
 (9) PRESENT POSTOFFICE OF FATHER Spokane, S.C.
 (10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY 32 (Years)
 (12) BIRTHPLACE Augusta, Ga.
 (13) OCCUPATION RR. Broker
 (20) Number of children born to mother, including present birth 2

MOTHER
 (14) NAME BEFORE MARRIAGE Jessie Brown
 (15) PRESENT POSTOFFICE OF MOTHER Spokane, S.C.
 (16) COLOR OR RACE Col. (17) AGE AT LAST BIRTHDAY 23 (Years)
 (18) BIRTHPLACE Spokane Co. S.C.
 (19) OCCUPATION Laundress
 (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 Born alive at 4 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jessie Miller
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Spokane, S.C.

Given name added from a supplemental report
 (26) Witness J. H. Marshall M. H.
 (Signature of Witness necessary only when question 23 is signed by mark)

19 22 Registrar Sept 26, 1922 (27) Filed Sept 26, 1922 (28) Mrs. E. F. Parker Local Registrar

When there was no attending physician or midwife, then the father, mother, or other household etc. should make this return.