

(1) PLACE OF BIRTH

County of Bamberg
 Township of Bamberg
 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

17586

Registration District No. 400 Registered No. 50
 (For use of Local Registrar)

(No. St.; Ward)
 If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child George Maxwell Bowdifer If child is not yet named, make
 provisional report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 11, 1927
 (Month) (Day) (Year)

FATHER.

(8) FULL NAME G. M. Bowdifer

(9) PRESENT POSTOFFICE OF FATHER Bamberg, S.C., R7D

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38 (Years)

(12) BIRTHPLACE Barnwell Co., S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth Fourth

MOTHER.

(14) NAME BEFORE MARRIAGE Pearl Rice

(15) PRESENT POSTOFFICE OF MOTHER Bamberg, S.C., R7D

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31 (Years)

(18) BIRTHPLACE Bamberg Co., S.C.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth Fourth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 3:30 P.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. S. Whitley, M.D. (24) State whether Physician or Midwife (25) Address of Physician or Midwife Bamberg, 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 June 21, 1927 (28) 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.