

(1) PLACE OF BIRTH

County of Harry
 Township of Lowway
 or
 Inc. Town of
 or
 City of

(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 L. F. Vaught

File No.—For State Registrar Only

42958

Registration District No. 2522 Registered No. 206
 (For use of Local Registrar)

(3) BOY OR GIRL? boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 3, 1922
 To be answered only in event of Twin or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Olen Vaught
 (9) PRESENT POSTOFFICE OF FATHER Myrtle Beach S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 30 (Years)
 (12) BIRTHPLACE Harry Co. S.C.
 (13) OCCUPATION farming
 (20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Vieta Chestnut
 (15) PRESENT POSTOFFICE OF MOTHER Myrtle Beach S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 20 (Years)
 (18) BIRTHPLACE Harry Co. S.C.
 (19) OCCUPATION Housewife
 (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 7... A.M., on the date above stated. her (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary L. Cooper

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

MidwifeMyrtle Beach, S.C.

Given name added from a supplemental report

(26) Witness J. H. Cooper

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

(27) Filed Jan 5, 1923

(28)

J. L. Dwyer
Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make the 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.