

1) PLACE OF BIRTH

County of Anderson

Township of

Inc. Town of J.City of Piedmont

(No. St.; Ward)

2) Full Name of Child Julia Powell3) SEX OF CHILD Girl4) Twin or Triplet? No5) Number in order of birth 16) Are Parents Married? Yes7) DATE OF BIRTH June 12, 19228) FATHER'S FULL NAME Cleo Powell9) PRESENT POSTOFFICE OF FATHER Piedmont S.C.10) COLOR OR RACE White11) AGE AT LAST BIRTHDAY 2812) BIRTHPLACE S.C.13) OCCUPATION Fertile work14) MOTHER'S NAME BEFORE MARRIAGE Drsey Leppor15) PRESENT POSTOFFICE OF MOTHER Piedmont S.C.16) COLOR OR RACE White17) AGE AT LAST BIRTHDAY 2818) BIRTHPLACE N.C.19) OCCUPATION Domestic20) Number of children born to mother, including present birth 621) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:30 P.M. on the date above stated.(23) (Signature) A. D. Campbell(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Piedmont

Given name added from a supplemental report

(26) Witness

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

(27) Filed June 13, 1922(28) J. T. Fleming

Local Registrar

REGISTRAR

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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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File No.—For State Registrar Only

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Registered No. 39

(For use of Local Registrar)

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