

FORM NO. 1.

(1) PLACE OF BIRTH

County of HarryTownship of Bayboroor
Inc. Town ofor
City of

(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

49467

Registration District No. 2500Registered No. 122

(For use of Local Registrar)

(2) Full Name of Child Juley May Dodd { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married yes (7) DATE OF BIRTH Feb 27 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME W S Dodd(9) PRESENT POSTOFFICE OF FATHER Allen S C(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE

Harry Co(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth { 5

MOTHER.

(14) NAME BEFORE MARRIAGE Mary B Dodd(15) PRESENT POSTOFFICE OF MOTHER Allen S C(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30 (Years)

(18) BIRTHPLACE

Harry Co(19) OCCUPATION Housewife

(21) 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 3 (Hour A. M. or P. M.) on the date above stated.(23) (Signature) S M Bryant

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Allen S C

Given name added from a supplemental report

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Registrar

(26) Witness W S Dodd (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Mar 8 1914 (28) J W General 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.

WRITE PLAINLY, WITH UNFADING INK—FILL IN A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia.