

MARGIN REMOVED FOR BINDING.
WRITE PLAINLY. WITH SPACING. THIS IS A PERMANENT RECORD.
In case of twins or triplets use a separate blank form for each child, and mark the
FIRST-BORN. No 1 THE OTHER No 2, etc. in question 3
bottom of columns. Columns 9 & 10

(1) PLACE OF BIRTH

County of Johnson
Township of Marion
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

4565

Registration District No. 3203

Registered No. 6
(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

Ray, Carroll William

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

Feb 10 1923

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Ray, Carroll William

(9) PRESENT POSTOFFICE OF FATHER

Marion, S. C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

(Year)

(12) BIRTHPLACE

Marion, S. C.

(13) OCCUPATION

Farmer

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

1

MOTHER.

(14) NAME BEFORE MARRIAGE

Widger, Cora Lee Powell

(15) PRESENT POSTOFFICE OF MOTHER

Marion, S. C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

(Year)

(18) BIRTHPLACE

Marion, S. C.

(19) OCCUPATION

Housewife

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 6:40 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

(Given name added from a supplemental report)

(26) Witness

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

(27) Filed

Feb 10 1923

(28)

Marion, S. C.

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.