

(1) PLACE OF BIRTH

County of DelawareTownship of Congreeor
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

39270

Registration District No. 3105 Registered No. 128

(For use of Local Registrar)

(2) Full Name of Child John Luther Mathias (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?

yes

(7) DATE OF BIRTH

Nov 10 1922
(Name of Month) (Day) (Year)(8) FULL NAME FATHER Frank L. Mathias(9) PRESENT POSTOFFICE OF FATHER New Brookland(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 37
(Years)(12) BIRTHPLACE Langston SC(13) OCCUPATION Butcher(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Dorinda Lee Brown(15) PRESENT POSTOFFICE OF MOTHER New Brookland(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18
(Years)(18) BIRTHPLACE Gilbert SC(19) OCCUPATION house wife(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 alive at 4:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Francis Wagner(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife New Brookland

Given name added from a supplemental report

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

(27) Filed 11/28 to 22 (28) J. P. Lybrand 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.

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