

(1) PLACE OF BIRTH

County of Union  
Township of Union  
or  
Inc. Town of Union  
or  
City of Union

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No. - For State Registrar Only  
**22831**

Registration District No. 1207

Registered No. 67  
(For use of Local Registrar)

(No. Ward 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 Dorothy Juanita Strickland  
If child is named, make supplemental report as directed

3 SEX OF CHILD Girl 4 AGE OF MOTHER 20 5 NUMBER IN ORDER OF BIRTH 1 6 SEX OF MOTHER Female 7 DATE OF BIRTH July 6 1923  
(Month of Month) (Day) (Year)

FATHER  
(8) FULL NAME Ernest S. Strickland

(9) PRESENT RESIDENCE OF FATHER Union S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31  
(Year)

(12) BIRTHPLACE Union Co S.C.

(13) OCCUPATION Public Car Driver

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

MOTHER  
(14) FULL NAME Jeannette Sumner

(15) PRESENT RESIDENCE OF MOTHER Union S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20  
(Year)

(18) BIRTHPLACE Union Co S.C.

(19) OCCUPATION Domestic

(21) Number of children of this mother born, including present birth One

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. (If born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. P. Sallee

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Union S.C.

Given name added from a supplemental report

L. L. Riser, M.D.

10/27/43 19 19  
Registrar

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

(27) Filed 8 10 23 (28) J. S. Sallee  
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.

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.