CERTIFICATE OF BIRTH

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

File No.—For State Registrar 38063 X

(1) PLACE OF BIRTH

County of York

Township of Bullock Creek

or Inc. Town of .....

or City of ..... (No. ..... St.; ..... Ward)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 4463 Registered No. 55 (For use of Local Registrar)

(2) Full Name of Child Martha Lucile (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD Girl (4) Twin or Triplet? (5) Number in order of birth — To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes (7) DATE OF BIRTH Nov 18 1923 (Month) (Day) (Year)

FATHER.

(8) FULL NAME Jesse Lee

(9) PRESENT POSTOFFICE OF FATHER Lowndes Grove S C

(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 34 (Years)

(12) BIRTHPLACE Chesterfield S C

(13) OCCUPATION Farmer Farm Hand

(20) Number of children born to mother, including present birth 15

MOTHER.

(14) NAME BEFORE MARRIAGE Corintha Worthey

(15) PRESENT POSTOFFICE OF MOTHER Bullock Creek S C

(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 26 (Years)

(18) BIRTHPLACE Chester Co S C

(19) OCCUPATION Housework

(21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 1 A. M. (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Mattie Theagene Cornwell

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Bullock Creek S C

Given name added from a supplemental report .....

..... 19 .... Registrar

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

(27) Filed Nov 28 1923 (28) W. C. Mitchell 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.