

(1) PLACE OF BIRTH

County of Charleston
 Township of Wampollett
 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

20167

Registration District No. 4001-CRegistered No. 57
(For use of Local Registrar)

(No. 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

Seton

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

3) BOY OR GIRL? Boy 4) Twin or Triplet? No 5) Number in order of birth 3 6) Are Parents Married? Yes 7) DATE OF BIRTH Jan 8, 1922
 (Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Seton
 9) PRESENT POSTOFFICE OF FATHER Whitney St
 10) COLOR OR RACE White 11) AGE AT LAST BIRTHDAY 35 (Years)
 12) BIRTHPLACE N. C.
 13) OCCUPATION Teacher

MOTHER.

14) NAME BEFORE MARRIAGE Mary Sue Fullbright
 15) PRESENT POSTOFFICE OF MOTHER Whitney St
 16) COLOR OR RACE White 17) AGE AT LAST BIRTHDAY 25 (Years)
 18) BIRTHPLACE N. C.
 19) OCCUPATION House wife
 20) Number of children born to mother, including present birth 3
 21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... Alive ... at 7:30 P.M., on the date above stated. (Born alive or stillborn (Hour, M. or P. M.))

(23) (Signature) D. E. Morrison(24) State whether Physician or Midwife Phys(25) Address of Physician or Midwife Wampollett

Given name added from a supplemental report

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

(27) Filed 1-9 19 22 (28) C. L. Murphy 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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~~STATE OF SOUTH CAROLINA)~~
COUNTY OF SPARTANBURG)

Personally appeared before me R. J. Dotson, who first being duly sworn says that he is the father of Bonnie Catherine Dotson, who was born on January 8, 1922, and inasmuch as his daughter's name was not put in the birth record by the attending physician and for that reason it does not appear in the birth record on file in the Clerk of Court, this deponent now takes oath that the child herein referred to was given the name of Bonnie Catherine, and that said child has never been known by any other name.

Sworn to before me this
9th day of December, 1940.

D. E. Carter
Notary Public for S. C.

R. J. Dotson

Father: R. J. Dotson
Mother: Mary Sue Fullbright
Date of birth: Jan. 8, 1922
Physician: Dr. E. L. Morrow.