

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc. In question 5.

State of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No. For State Registrar Only	
County of <u>Abbeville</u>		STATE OF SOUTH CAROLINA		9620	
Township of <u>Long Cane</u>		Bureau of Vital Statistics			
or Inc. Town of		State Board of Health			
or City of		Registration District No. <u>107</u>		Registered No. <u>11</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(For use of Local Registrar)			
(2) Full Name of Child <u>Robert Luther</u>					
(3) BOY OR GIRL	(4) Twin or Triplets? <u>1</u>	(5) Number in order of birth <u>4</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Mar 11 1922</u>	
To be answered only in event of Twins or Triplets					
FATHER			MOTHER		
(8) FULL NAME	<u>C. E. Bowie</u>		(14) NAME BEFORE MARRIAGE	<u>Lucile Thiel</u>	
(9) PRESENT POSTOFFICE OF FATHER	<u>Donald 2c</u>		(15) PRESENT POSTOFFICE OF MOTHER	<u>Donald 2c</u>	
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>38</u>	(Year)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>33</u>	(Year)
(12) BIRTHPLACE <u>Abb C</u>			(18) BIRTHPLACE <u>Abb C</u>		
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>House wife</u>		
(20) Number of children born to mother, including present birth <u>4</u>			(21) Number of children of this mother now living, including present birth <u>4</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was <u>born alive</u> at <u>7 1/2</u> M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>J. R. Bowie</u>		(25) Address of Physician or Midwife			
(24) State whether Physician or Midwife					
Given name added from a supplemental report <u>1</u>		(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)			
..... 19		(27) Filed <u>Apr 11 1922</u> (28) <u>E. H. Miller</u> Local Registrar			
..... 19					
*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.					