

(1) PLACE OF BIRTH

County of ChesterTownship of HopewellIncl. 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. 11A3Registered No. 3
(For use of Local Registrar)(2) Full Name of Child Infant Margaret Franklin

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

(3) Sex of Child
Female(4) Twin or Triplet?
No(5) Number in order of birth
1(6) Are Parents Married?
Yes(7) DATE OF BIRTH Feb. 26, 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Benjamin Hubert Franklin(9) PRESENT POSTOFFICE OF FATHER Chester R. 7 S. #1(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 54
(Years)(12) BIRTHPLACE Yakima, Wash.(13) OCCUPATION Minister(14) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Margaret Virginia Pearcy(15) PRESENT POSTOFFICE OF MOTHER Chester R. 7 S. #1(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 38
(Years)(18) BIRTHPLACE Davidson Co. Tenn.(19) OCCUPATION House wife(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 4:15 P. M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) A. M. Wilson(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Physician, Chester S.C.

Given name added from a supplemental report

..... 101

..... Registrar

(26) Witness (Signature of Witness necessary only when question 28 is signed by mark)

(27) Filed Mar. 17, 1923 (28) S. Simpson 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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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.

County of Columbia