MARGIN RESERVED FOR BINDING.

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.

McCAW OF COLUMBIA, COLUMBIA, S. C.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only: 8

(1) PLACE OF BIRTH

County of Abbeville

Township of Abbeville
or
Inc. Town of .....
or
City of .....

Registration District No. 100 Registered No. 1 (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 Lilly Adams (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? 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? No

(7) DATE OF BIRTH Jan 1, 1922 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME John Adams	(14) NAME BEFORE MARRIAGE Nina Donaldson
(9) PRESENT POSTOFFICE OF FATHER Abbeville S. C. R. F. D.	(15) PRESENT POSTOFFICE OF MOTHER Abbeville S. C. R. F. D.
(10) COLOR OR RACE Blk (11) AGE AT LAST BIRTHDAY 18 (Years)	(16) COLOR OR RACE Blk (17) AGE AT LAST BIRTHDAY 17 (Years)
(12) BIRTHPLACE Abbeville Co. S. C.	(18) BIRTHPLACE Abbeville S. C.
(13) OCCUPATION Farmer	(19) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 2	(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 born alive at 1 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lou X Lindsay

(24) State whether Physician or Midwife: Midwife

(25) Address of Physician or Midwife: Abbeville

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

..... 19 ....
Registrar

(26) Witness J. E. Pressley (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan 7 1922 (28) J. E. Pressley
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.