

(1) SEX OF CHILD

County of Franklin

Township of Franklin

City of Franklin

or

Day of April

(2) Full Name of Child Infant Aiken

(3) SEX OF CHILD Girl

(4) TIME OF BIRTH 2:30

(5) NUMBER IN ORDER OF BIRTH 1

(6) DATE OF BIRTH April 18, 1923

(7) COLOR OF CHILD Cul

(8) RACE OF CHILD Cul

(9) BIRTHPLACE Franklin Co

(10) OCCUPATION Farmer

(11) NUMBER OF CHILDREN BORN TO MOTHER, INCLUDING PRESENT BIRTH 5

(12) NAME OF MOTHER Olga M. Aiken

(13) SEX OF MOTHER Female

(14) COLOR OF MOTHER Cul

(15) RACE OF MOTHER Cul

(16) BIRTHPLACE Franklin Co

(17) OCCUPATION Domestic

(18) NUMBER OF CHILDREN OF THIS MOTHER NOW LIVING, INCLUDING PRESENT BIRTH 3

(19) FULL NAME OF FATHER Geo Aiken

(20) PRESENT RESIDENCE OF FATHER Woodruff S.C.

(21) COLOR OF FATHER Cul

(22) RACE OF FATHER Cul

(23) BIRTHPLACE Franklin Co

(24) OCCUPATION Farmer

(25) NUMBER OF CHILDREN BORN TO FATHER, INCLUDING PRESENT BIRTH 5

(26) NUMBER OF CHILDREN OF THIS FATHER NOW LIVING, INCLUDING PRESENT BIRTH 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(27) I hereby certify that I attended the birth of this child, who was born alive or stillborn on the date above stated.

(28) (Signature) Cornelia M. Wynn

(29) State whether Physician or Midwife (30) Address of Physician or Midwife

midwife Woodruff S.C.

Given name added from a supplementary report

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Registrar

(31) Witness

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

(32) Date Apr 18, 1923 (33) Chas. L. Boyter

\*When there was no attending physician or midwife, then the father, householder, etc., should make the report. A child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before fifth month of pregnancy.