

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.

McClaw, of Columbia.

(1) PLACE OF BIRTH

County of Wicks
Township of WardsInc. Town of
City of
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of HealthFile No.—For State Registrar Only
40637Registration District No. 2/4 Registered No. 4
(For use of Local Registrar)
St.; Ward)

(2) Full Name of Child. { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth 2 (6) Are yes Parents Married? (7) DATE OF BIRTH Nov. 21 1922
(Name of Month) (Day) (Year)FATHER.
(8) FULL NAME Johannie Holmes(9) PRESENT POSTOFFICE OF FATHER Ridge Springs(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 24 (Years)(12) BIRTHPLACE Wicks Co.(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 2MOTHER.
(14) NAME BEFORE MARRIAGE Ollie Willie Dunning(15) PRESENT POSTOFFICE OF MOTHER Ridge Springs(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 19 (Years)(18) BIRTHPLACE Edgefield Co.(19) OCCUPATION Housewife(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 1:50 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) D. B. Frontis(24) State whether Physician or Midwife (25) Address of Physician or Midwife Phyo Ridge Springs

Given name added from a supplemental report

..... 191....

..... Registrar

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Jan 10 1923 (28) H. E. Deuch 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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