

RECORD OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Cherokee
 Township of Cherokee
 or
 Inc. Town of.....
 or
 City of.....

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

File No.—For State Registrar Only
18195

Registration District No. 1206

Registered No. 64
 (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 S. Frank (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Girl (4) Twin or Triplet? twins (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH June 11 1922
 (Name of Month) (Day) (Year)

| FATHER. | | MOTHER. | |
|---|---|---|---|
| (8) FULL NAME <u>Long Statts</u> | (14) NAME BEFORE MARRIAGE <u>Lattie Richardson</u> | (15) PRESENT POSTOFFICE OF FATHER <u>Piedmont</u> | (15) PRESENT POSTOFFICE OF MOTHER <u>Piedmont</u> |
| (10) COLOR OR RACE <u>White</u> | (11) AGE AT LAST BIRTHDAY <u>38</u> (Years) | (16) COLOR OR RACE <u>White</u> | (17) AGE AT LAST BIRTHDAY <u>31</u> (Years) |
| (12) BIRTHPLACE <u>S.C.</u> | (13) OCCUPATION <u>Farming</u> | (18) BIRTHPLACE <u>S.C.</u> | (19) OCCUPATION <u>House-keeping</u> |
| (20) Number of children born to mother, including present birth <u>17</u> | (21) Number of children of this mother now living, including present birth <u>7</u> | | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 5 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) [Signature]
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Piedmont S.C.

Given name added from a supplemental report
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 7/8 1922 (28) [Signature] 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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