

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.

N. B.—

McGraw-Hill, Columbia, S. C.

(1) PLACE OF BIRTH

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

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

Frank Davis

File No.—For State Registrar Only  
**20626**

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

Registration District No. 100 Registered No. 49  
(For use of Local Registrar)

(No. .... St.; ..... Ward)

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

(3) BOY OR GIRL? boy (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth ..... (6) Are Parents Married? yes (7) DATE OF BIRTH July 15, 1922  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Dave Davis  
(9) PRESENT POSTOFFICE OF FATHER Abbeville, S.C. R. 38.  
(10) COLOR OR RACE Blk. (11) AGE AT LAST BIRTHDAY 22  
(Years)  
(12) BIRTHPLACE S. C.  
(13) OCCUPATION Farming  
(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Pearl Stranahan  
(15) PRESENT POSTOFFICE OF MOTHER Abbeville, S.C. State route  
(16) COLOR OR RACE Blk. (17) AGE AT LAST BIRTHDAY 22  
(Years)  
(18) BIRTHPLACE S. C.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 6 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Ressie S. Presley (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Abbeville, S. C.

Given name added from a supplemental report

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

(27) Filed July 28, 1922 (28) J. E. Presley  
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.

....., 19 ....., (27) Filed July 28, 1922 (28) J. E. Presley  
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