

WHITE MAINLY, 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.
McGraw, of Columbia.

(1) PLACE OF BIRTH

County of Rushland

Township of

or
Inc. Town of

or
City of Columbia

(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 Health

File No.—For State Registrar Only

36229

Registration District No. 38a Registered No. 1845

(For use of Local Registrar)

St. Ward)

(2) Full Name of Child Leah Marcus Davis If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct. 10 1922 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Gordon E. Davis

(9) PRESENT POSTOFFICE OF FATHER Columbia

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Painter

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Estherline E. Davis

(15) PRESENT POSTOFFICE OF MOTHER Columbia

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 17 (Years)

(18) BIRTHPLACE Rich. S.C.

(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 at 3.45 P.M. (Born live or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) B. K. N. [Signature]

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Columbia

Given name added from a supplemental report

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Registrar

(26) Witness (Signature of Witness necessary only when question 25 is signed by mark)

(27) Filed 11-12-1912 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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