

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.

McGAW OF COLUMBIA, COLUMBIA, S. C.

N. 1

(1) PLACE OF BIRTH

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

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

File No.—Per State Regis  
20599

Registration District No. 4408 Registered No. 86  
(For use of Local Registrar)

City of ..... (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

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? No (7) DATE OF BIRTH June 18, 1922  
(Month) (Day) (Year)

FATHER.

(8) FULL NAME Tom Wright  
(9) PRESENT POSTOFFICE OF FATHER Charlotte NC  
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 32  
(Years) (12) BIRTHPLACE Charlotte NC  
(13) OCCUPATION Day Laborer  
(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Jan Crawford  
(15) PRESENT POSTOFFICE OF MOTHER York SC  
(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 36  
(Years) (18) BIRTHPLACE York Co  
(19) OCCUPATION Domestic  
(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 574 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Geo J. B. Allen

(24) State whether Physician or Midwife (25) Address of Physician or Midwife York SC

Given name added from a supplemental report

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

(27) Filed June 18, 1922 (28) Geo J. B. Allen 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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