(1) PLACE OF BIRTH

County of Fairfield

Township of 12

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.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
4[illegible]6

Registration District No. 1911 Registered No. 25
(For use of Local Registrar)

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

(2) Full Name of Child Franklin Pope

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
To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Feby. 10, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Frank Earle Pope

(9) PRESENT POSTOFFICE OF FATHER Winnsboro R.F.D. 3

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26 (Years)

(12) BIRTHPLACE Fairfield Co. S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Ethel Dry Connell

(15) PRESENT POSTOFFICE OF MOTHER Winnsboro R.F.D. 3

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)

(18) BIRTHPLACE York Co. S.C.

(19) OCCUPATION Housekeeper

(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 1.20 P.M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Saml. Tuckey M.D.

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

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 16 Feb. 1916 (28) W. R. Aiken
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.

Registrar I [illegible] Local Registrar.

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McCaw.