

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.

Form No. 1

(1) PLACE OF BIRTH

County of Georgetown
Township of Jefferson
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

34503

Registration District No. 2-1-P-7 Registered No. 128
(For use of Local Registrar)

(No. 128 St. 128 Ward 128)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mary Ann Franklin If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Female (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 12, 1927
(Name) (Month) (Day) (Year)

FATHER: (8) FULL NAME James Franklin (9) PRESENT POSTOFFICE OF FATHER Rhens SC (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 25 (Years) (12) BIRTHPLACE Georgetown County SC (13) OCCUPATION Farmer
MOTHER: (14) NAME BEFORE MARRIAGE Lucile Brent (15) PRESENT POSTOFFICE OF MOTHER Rhens SC (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 23 (Years) (18) BIRTHPLACE Georgetown County SC (19) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 2 (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 7 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lynda Small Midwife (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Rhens SC

Given name added from a supplemental report
19
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) Chas. R. Bailey
(27) Filed Sept 12, 1927 (28) 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.

MCAN OF COLUMBIA, COLUMBIA, S. C.