

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.

McGraw-Hill, Columbia, S. C.

(1) PLACE OF BIRTH

County of Union  
Township of Forsville  
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

5992

Registration District No. 4204 Registered No. 6  
(For use of Local Registrar)

(No. 410122 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 Albie Giles If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 20 1922  
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Noah Giles Jr  
(9) PRESENT POSTOFFICE OF FATHER Forsville S.C.  
(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 20 (Year)  
(12) BIRTHPLACE Union Co S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 2

MOTHER

(14) NAME BEFORE MARRIAGE Abbie Mims  
(15) PRESENT POSTOFFICE OF MOTHER Forsville S.C.  
(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 20 (Year)  
(18) BIRTHPLACE Union Co S.C.  
(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 white at 3 P.M., on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)  
(23) (Signature) Noah Giles Jr  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife .....

Given name added from a supplemental report

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

(27) Filed 1/26 1922 (28) Geo. L. Warr 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.