

1. PLACE OF BIRTH

Newberry

County of

or

City of

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

Registration District No. 2409

FILE No.—For State Registrar Only

29466 A

Registered No. 11

(For use of Local Registrar)

(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

Daniel Lee Franklin

(If child is not yet named, make supplemental report as directed.)

1. BOY OR GIRL

Boy

4. Twin or Triplet?

5. Number in order of birth

6. Are Parents Married?

Yes

7. DATE OF BIRTH

Sep. 1st 1923

(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER

8. FULL NAME

Ben Griffin Franklin

9. PRESENT POSTOFFICE OF FATHER

Newberry R.F.D. #6

10. COLOR OR RACE

White

11. AGE AT LAST BIRTHDAY

39 (Years)

12. BIRTHPLACE

Newberry Or

13. OCCUPATION

Farmer

14. Number of children born to mother, including present birth

Five

MOTHER

15. NAME BEFORE MARRIAGE

Audine Daulton

16. PRESENT POSTOFFICE OF MOTHER

Newberry R.F.D. #6

17. COLOR OR RACE

White

18. AGE AT LAST BIRTHDAY

34 (Years)

19. BIRTHPLACE

Draughton Or

20. OCCUPATION

F.W.H.

21. Number of children of this mother now living, including present birth

Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

23. Signature

24. State whether Physician or Midwife

25. Address of Physician or Midwife

26. Witness

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

27. Filed

Apr. 19 1926

28.

Local Registrar

Given name added from a supplemental report

19. 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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