(1) PLACE OF BIRTH

County of Chesterfield, S.C.

Township of Cheraw, S.C.

or

Inc. Town of Cheraw, S.C. Registration District No. 127 Registered No. 2

(For use of Local Registrar)

or

City of ..... (No. ..... St.; ..... Ward)

(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: 897

(2) Full Name of Child: Frances Louise Summer Ford

If child is not yet named, make supplementary report as directed

| (3) Sex | (4) Twin or Triplet? | (5) Number in order of birth | (6) Are Parents Married? | (7) DATE OF BIRTH |
|---|---|---|---|---|
| Girl | | | Yes | Mar. 5 28 (Month) (Day) (Year) |

**FATHER**

(8) FULL NAME: W. L. Summer Ford

(9) PRESENT POSTOFFICE OF FATHER: Wingate, N.C.

(10) COLOR OR RACE: white

(11) AGE AT LAST BIRTHDAY: 46 (Years)

(12) BIRTHPLACE: Florence Co., S.C.

(13) OCCUPATION: Merchant

(14) Number of children born to mother, including present birth: 2

**MOTHER**

(14) NAME BEFORE MARRIAGE: Mary Elizabeth McCall

(15) PRESENT POSTOFFICE OF MOTHER: Cheraw, S.C.

(16) COLOR OR RACE: white

(17) AGE AT LAST BIRTHDAY: 28 (Years)

(18) BIRTHPLACE: Chesterfield Co., S.C.

(19) OCCUPATION: Housewife

(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 alive at 3 A.M. (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) J. S. Hundendurk

(24) State whether Physician or Midwife: Physician

(25) Address of Physician or Midwife: Cheraw, S.C.

Given name added from a supplemental report

..... 4 191....

..... Registrar

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

(27) Filed Jan. 6 1923. (28) Mattie ... 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.

22 If child breathed even once, it must be reported as a live birth. Report stillbirths only after the fifth month of pregnancy.