

## (1) PLACE OF BIRTH

County of McCormick  
 Township of Washington  
 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

39336

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

City of..... (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 Martha Grant { 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 Nov 2, 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Will Grant  
 (9) PRESENT POSTOFFICE OF FATHER Parkville S.C.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 27 (Year)  
 (12) BIRTHPLACE Edgefield Co  
 (13) OCCUPATION Farming  
 (20) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Martha Callahan  
 (15) PRESENT POSTOFFICE OF MOTHER Parkville S.C.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 25 (Year)  
 (18) BIRTHPLACE Edgefield Co.  
 (19) OCCUPATION Housework  
 (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 4:30 P.M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Augusta Ann Swales Parkville  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Dec 9, 1922 (28) JK Cantelero  
 Registrar 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.