

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.

McGAW OF COLUMBIA, COLUMBIA, D. C.

(1) PLACE OF BIRTH

County of Saluda
Township of #7
or
Inc. Town of.....
or
City of

(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

23757

Registration District No. 3901

Registered No. 57
(For use of Local Registrar)

(2) Full Name of Child Vola Davis

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

3) BOY OR GIRL? girl 4) Twin or Triplet? To be answered only in event of Twins or Triplets 5) Number in order of birth 12 6) Are Parents Married? yes 7) DATE OF BIRTH March 11, 1922
(Name of Month) (Day) (Year)

FATHER.

8) FULL NAME John Davis
9) PRESENT POSTOFFICE OF FATHER Ridge Spring
10) COLOR OR RACE negro 11) AGE AT LAST BIRTHDAY 40
(Years)
12) BIRTHPLACE Danville
13) OCCUPATION Farming
20) Number of children born to mother, including present birth 12

MOTHER.

14) NAME BEFORE MARRIAGE Alice Campbell
15) PRESENT POSTOFFICE OF MOTHER Ridge Spring
16) COLOR OR RACE negro 17) AGE AT LAST BIRTHDAY 37
(Years)
18) BIRTHPLACE Aiken Co
19) OCCUPATION Housewife
21) Number of children of this mother now living, including present birth 11

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) B. D. Fontenot

(24) State whether Physician or Midwife Phys

(25) Address of Physician or Midwife Ridge Spring SC

Given name added from a supplemental report

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

(27) Filed Aug 12, 1922 (28) F. W. Crouch 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.

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