CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only: 14303

(1) PLACE OF BIRTH
County of Chesterfield
Township of Cheraw
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.)

Registration District No. 12.01 Registered No. 54
(For use of Local Registrar)
(No. ..... St.; ..... Ward)

(2) Full Name of Child Fannie Caraway (If child is not yet named, make supplemental report as directed)

(3) ~~BOY OR~~ GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
	To be answered only in event of Twins or Triplets		Yes	May 19 (Name of Month) 19 22 (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME	Kirby Caraway	(14) NAME BEFORE MARRIAGE	Della Wall
(9) PRESENT POSTOFFICE OF FATHER	Cheraw S.C.	(15) PRESENT POSTOFFICE OF MOTHER	Cheraw S.C.
(10) COLOR OR RACE	Blk	(16) COLOR OR RACE	Blk
(11) AGE AT LAST BIRTHDAY (Years)	30	(17) AGE AT LAST BIRTHDAY (Years)	29
(12) BIRTHPLACE	N.C.	(18) BIRTHPLACE	N.C
(13) OCCUPATION	Farmlaborer	(19) OCCUPATION	Farm Laborer
(20) Number of children born to mother, including present birth	5	(21) Number of children of this mother now living, including present birth	4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) at 9 A.M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Wincy Pigues
(24) State whether Physician or Midwife: midwife
(25) Address of Physician or Midwife: Cheraw S.C.

Given name added from a supplemental report
.....
..... 19.... Registrar

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

(27) Filed May 20 1922 (28) P. B. Ingram 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.

Medw of Columbia, Columbia, S. C.
FIRST-BORN, No. 1, THIS OFFICE, No. 2, etc., in question 5.