

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
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.

McGraw-Hill, Columbia, S. C.

(1) PLACE OF BIRTH

County of Arby
Township of Arby
OR
Inc. Town of.....
OR
City of.....

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

Registration District No. 3613

File No.—For State Registrar Only

23468

Registered No. 88
(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 Ed. Fidler Jr (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH March 10, 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Ed Fidler
(9) PRESENT POSTOFFICE OF FATHER Arby SC
(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 21 (Years)
(12) BIRTHPLACE Arby SC
(13) OCCUPATION Wagon Driver
(20) Number of children born to mother, including present birth One

MOTHER.
(14) NAME BEFORE MARRIAGE Burness White
(15) PRESENT POSTOFFICE OF MOTHER Arby SC
(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 16 (Years)
(18) BIRTHPLACE Arby SC
(19) OCCUPATION Wagon Driver
(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10:30 P. M., on the date above stated.
(Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) Georgia Ann Burness

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife
Midwife Anna Fidler

Given name added from a supplemental report

(26) Witness

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

(27) Filed July 29, 1922

(28) A. L. Fidler
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.