

(1) PLACE OF BIRTH

County of Calhoun
 Township of Amherst
 or
 Inc. Town of
 or
 City of (No. St.; Ward)

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

17760

Registration District No. 820 Registered No. 66
 (For use of Local Registrar)

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? — (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 20 1922
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Merion Guignard
 (9) PRESENT POSTOFFICE OF FATHER St. Matthews

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 15 1/2 (Years)

(12) BIRTHPLACE South Carolina

(13) OCCUPATION Job work

(14) Number of children born to mother, including present birth 1

MOTHER
 (14) NAME BEFORE MARRIAGE Mary Taylor

(15) PRESENT POSTOFFICE OF MOTHER St. Matthews

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 16 (Years)

(18) BIRTHPLACE South Carolina

(19) OCCUPATION Farmer work

(20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 11 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Doylin L. Derian

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife St. Matthews

Given name added from a supplemental report

(26) Witness A. R. Abe (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed June 28 1922 (28) A. R. Abe 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.

THIS IS A PRELIMINARY REPORT. IT IS NOT TO BE USED FOR ANY OTHER PURPOSE. IT IS NOT TO BE USED FOR ANY OTHER PURPOSE. IT IS NOT TO BE USED FOR ANY OTHER PURPOSE.