

RECEIVED BY THE REGISTRAR OF THE STATE OF SOUTH CAROLINA. THIS IS A PERMANENT RECORD. WHEN FILING THIS REPORT, THE REGISTRAR WILL BE RECORDING THE NAME OF EACH CHILD, AND MAKE THE FIRST-BORN, No. 1, THE OTHER, No. 2, ETC. IN QUESTION 5.

(1) PLACE OF BIRTH

County of Calhoun

Township of Amelia

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

17730

Registration District No. 800

Registered No. 76  
(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 Caroline Friday

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? X (5) Number in order of birth 8 (6) Are Parents Married? yes (7) DATE OF BIRTH Feb 7 19 22  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Cambell Friday

(9) PRESENT POSTOFFICE OF FATHER Fork Matte S.C.

(10) COLOR OR RACE B (11) AGE AT LAST BIRTHDAY 38 (Years)

(12) BIRTHPLACE Calhoun Co. S.C.

(13) OCCUPATION Farm laborer

(20) Number of children born to mother, including present birth Eight

MOTHER.

(14) NAME BEFORE MARRIAGE Gracie Friday

(15) PRESENT POSTOFFICE OF MOTHER Fork Matte

(16) COLOR OR RACE B (17) AGE AT LAST BIRTHDAY 35 (Years)

(18) BIRTHPLACE Calhoun Co. S.C.

(19) OCCUPATION House wife

(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive Feb 7 at 8 A. M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) Phillis K. Parker

(24) State whether Midwife or Midwife (25) Address of Fork Matte

Given name added from a supplemental report

(26) Witness J. A. Waddy M.D.

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

(27) Filed Feb 10 19 22 (28) P. Parker

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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