

MARGIN RESERVED FOR BINDING.

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.

MADE IN COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of *Spartanburg*Township of *Spartanburg*

OF

Inc. Town of *Clifton SC*

OR

City of *Clifton SC*

(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

36492

Registration District No. *4.008*Registered No. *354*
(For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child

Crocker

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

(3) BOY OR GIRL

Girl

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twins or Triplets

7

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Sept 18 34

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Will Crocker

(9) PRESENT POSTOFFICE OF FATHER

Clifton S.C.

(10) COLOR OR RACE

W.

(11) AGE AT LAST BIRTHDAY

49

(Year)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Graville

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

Seven

MOTHER.

(14) NAME BEFORE MARRIAGE

Sauai Massey.

(15) PRESENT POSTOFFICE OF MOTHER

Clifton S.C.

(16) COLOR OR RACE

W.

(17) AGE AT LAST BIRTHDAY

35

(Year)

(18) BIRTHPLACE

N.C.

(19) OCCUPATION

House Work

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

Sauai

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *born* at *1 a* M., on the date above stated. (Born *live* or stillborn) (Hour *A.* M. or P. M.)

(23) (Signature)

Richard B. Plummer

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Clifton SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed *Oct 14 1922*(28) *Mrs. C. F. 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.