

MARRIAGE RESERVATION FOR BINDING.
 WHEN PRESENTED FOR BINDING, THIS IS A PERMANENT RECORD.
 IN CASE OF TWINNING OR TRIPLETS, THIS IS A PERMANENT RECORD.
 PRINTED IN THE STATE OF SOUTH CAROLINA, No. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.

(1) PLACE OF BIRTH

County of Saluda
 Township of N.D. 1
 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
2409

Registration District No. 3000A Registered No. 1
 (For use of Local Registrar)

(2) Full Name of Child

(3) DAY OR NIGHT Day (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Any legally adopted No (7) DATE OF BIRTH Jan 24 22
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (If child is not yet named, make supplemental report as directed)

FATHER
 (8) FULL NAME J.R. McCollough
 (9) PRESENT POSTOFFICE OF FATHER Leesville S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Years)
 (12) BIRTHPLACE Saluda Co
 (13) OCCUPATION Farming

MOTHER
 (14) NAME BEFORE MARRIAGE Cosie Goodie
 (15) PRESENT POSTOFFICE OF MOTHER Leesville
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 19 (Years)
 (18) BIRTHPLACE Saluda Co
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 1 (21) 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 born at 7 P.M. on the date above stated. (Born alive or stillborn) (Hour, M. or P.M.)
 (23) (Signature) W.T. Gibson
 (24) State whether Physician or Midwife (25) Address of Phys. or Midwife

Given name added from a supplemental report

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

19 Feb 4 22 Registrar (27) Filed Feb 4 22 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.