

MAGNETIC REPRODUCED RECORDING
THIS CARD IS A REPRODUCTION OF THE ORIGINAL RECORD AND IS NOT TO BE USED FOR ANY OTHER PURPOSE
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
BUREAU OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Cherokee

Township of Lincolnton

or

Inc. Town of

or

City of Gaffney S.C.

(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

25342

Registration District No. 1403 Registered No. 102

(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL?

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF

BIRTH Aug 9 19 22

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Danuel Quinn

(9) PRESENT POSTOFFICE OF FATHER

Gaffney S.C. RD 8

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

37

(Years)

(12) BIRTHPLACE

Spoutenburg S.C.

(13) OCCUPATION

Cotton Mill

MOTHER.

(14) NAME BEFORE MARRIAGE

Doris Medley

(15) PRESENT POSTOFFICE OF MOTHER

Gaffney S.C. RD 8

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

30

(Years)

(18) BIRTHPLACE

Cherokee Co S.C.

(19) OCCUPATION

House wife

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

7

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

6

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)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Aug 30 19 22

(28)

H. A. Catehart 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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