

second and
first born

FORM NO. 1
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.

McCaw, of Columbia.

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

(1) PLACE OF BIRTH
County of Union
Township of Union
or
Inc. Town of Union
City of Union
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 42-A Registered No. 171
(For use of Local Registrar)

(2) Full Name of Child Dorothy A. Meador
(No. 1)
(If child is not yet named, make supplemental report as directed)

(3) SEX OR GIRL girl (4) Twin of 2 (5) Number in order of birth 4 (6) Are Parent Married? yes (7) DATE OF BIRTH Nov. 11 1943
(Name of Month) (Day) (Year)

FATHER: (8) FULL NAME E. Roy K. Meador (9) PRESENT POSTOFFICE OF FATHER Union S.C. (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 28 (Years) (12) BIRTHPLACE Union S.C. (13) OCCUPATION mail carrier (20) Number of children born to mother, including present birth 4

MOTHER: (14) NAME BEFORE MARRIAGE Elizabeth Tucker (15) PRESENT POSTOFFICE OF MOTHER Union S.C. (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 32 (Years) (18) BIRTHPLACE Union S.C. (19) OCCUPATION Domestic (21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.) 6:30 A.M.

(23) (Signature) [Signature] (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Union S.C.

Given name added from a supplemental report 11/11/43 1943
M.B. Woodward, M.D. Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) [Signature]
(27) Filed Nov. 16 1943 (28) S.S. Sarrott 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.