

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, &c. in question 5.

McGraw-Hill, Columbia, S. C.

(1) PLACE OF BIRTH County of <u>Aiken</u> Township of <u>Winnsboro</u> OR Inc. Town of OR City of (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 Registration District No. <u>216</u>		File No.—For State Registrar Only 40647
(2) Full Name of Child <u>Loisace Ephraim</u>		Registered No. <u>93</u> (For use of Local Registrar) If child is not yet named, make supplemental report as directed		
(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec 9 1922</u> (Name of Month) (Day) (Year)
FATHER. (8) FULL NAME <u>Peter Ephraim</u> (9) PRESENT POSTOFFICE OF FATHER <u>Winnsboro SC</u> (10) COLOR OR RACE <u>Negro</u> (11) AGE AT LAST BIRTHDAY <u>48</u> (12) BIRTHPLACE <u>Dunbarton</u> (13) OCCUPATION <u>Farmer</u> (20) Number of children born to mother, including present birth <u>Eight</u>		MOTHER. (14) NAME BEFORE MARRIAGE <u>Sheldona Abue</u> (15) PRESENT POSTOFFICE OF MOTHER <u>Winnsboro SC</u> (16) COLOR OR RACE <u>Negro</u> (17) AGE AT LAST BIRTHDAY <u>40</u> (18) BIRTHPLACE <u>Winnsboro</u> (19) OCCUPATION <u>Farmer</u> (21) Number of children of this mother now living, including present birth <u>Seven</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE* (22) I hereby certify that I attended the birth of this child, who was <u>born alive</u> on the date above stated. (Hour A. M. or P. M.) (23) (Signature) <u>Harriett Allen Windsor</u> (24) State whether Physician or Midwife <u>midwife</u> (25) Address of Physician or Midwife Given name added from a supplemental report: (26) Witness (27) Filed <u>Dec 16 1922</u> 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.