

(1) PLACE OF BIRTH

County of Orangeburg
 Township of Liberty
 OF
 Inc. Town of
 OF
 City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No. 36020

Registration District No. 2616 Registered No. 85
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Julie Marie McMichael (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Age of Parents Yes (7) DATE OF BIRTH Oct. 10, 1922
 To be answered only in case of Twin or Triplet (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Living G. McMichael
 (9) PRESENT POSTOFFICE OF FATHER Cope SC R 4 D
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 41
 (12) BIRTHPLACE Orangeburg Co
 (13) OCCUPATION Farming
 (14) Number of children born to mother, including present birth Four

MOTHER
 (14) NAME BEFORE MARRIAGE Claudia Elder
 (15) PRESENT POSTOFFICE OF MOTHER Cope SC R 4 D
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27
 (18) BIRTHPLACE Orangeburg Co
 (19) OCCUPATION Housewife
 (20) Number of children of this mother now living, including present birth Four

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.)

(23) (Signature) Nancy L. Brown (24) Address of Physician or Midwife Cope SC R 4 D

Given name added from a supplemental report

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(25) (Signature) R. K. Wene (26) Address of Registrar or Clerk Cope SC R 4 D
 (27) (Signature) R. K. Wene (28) Address of Registrar or Clerk Cope SC R 4 D
 Local Registrar

When there was no attending physician or midwife, the Local Registrar should make this return. If a child breathes even once, it is a birth. No report is desired at stillbirths.

Record of Births, Columbia, S. C.