

BEFORE SIGNING, NO. 1. THE OTHER, NO. 2, ETC., IN QUESTION 5.
MCCAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Beaufort
Township of Bluffton
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

17641

Registration District No. 601 Registered No. 10
(For use of Local Registrar)

City of (No. St.; Ward)
If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Flora May Joiner If child is not yet named, make supplemental report as directed

3) BOY OR GIRL? girl 4) Twin or Triplet? 5) Number in order of birth 6) Are Parents Married? yes 7) DATE OF BIRTH June 4, 1922
(Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Bertie Joiner
9) PRESENT POSTOFFICE OF FATHER Bluffton, S.C.
10) COLOR OR RACE Negro 11) AGE AT LAST BIRTHDAY 42
(Years) 12) BIRTHPLACE Beaufort County
13) OCCUPATION Farmer & Fisherman
20) Number of children born to mother, including present birth 9

MOTHER.

14) NAME BEFORE MARRIAGE Bessie Simmons
15) PRESENT POSTOFFICE OF MOTHER Bluffton, S.C.
16) COLOR OR RACE Negro 17) AGE AT LAST BIRTHDAY 36
(Years) 18) BIRTHPLACE Beaufort County
19) OCCUPATION housewife
21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 5:20 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jane Simmons

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Bluffton, S.C.

Given name added from a supplemental report

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

(27) Filed June 17, 1922 (28) W. J. Trepp 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.