

MARGIN RESERVED FOR BINDING.
 WHITE PLAINLY, WITH UNFADING INK—WHEN IN 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. Third child, No. 3, etc., in question 5.
 MCGRAW HILL, N. Y.

(1) PLACE OF BIRTH

County of Anderson
 Township of Camden
 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
3028

Registration District No. 304 Registered No. 14
 (For use of Local Registrar)

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

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Feb. 11, 22</u> (Name of Month) (Day) (Year)
-----------------------------	---	------------------------------	-------------------------------------	--

FATHER.

(8) FULL NAME General Boyford
 (9) PRESENT POSTOFFICE OF FATHER Iva
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 25 (Years)
 (12) BIRTHPLACE Anderson Co
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Bessie Rayford
 (15) PRESENT POSTOFFICE OF MOTHER Iva
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 22 (Years)
 (18) BIRTHPLACE Anderson Co
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was ... Alive ... at 11 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) Hannah M. Adams
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness H. J. Adams
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Feb. 20, 22 (28) S. M. McAdams 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.