

(1) PLACE OF BIRTH

County of Aiken
 Township of Parkway Grove
 or
 Inc. Town of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

2883

Registration District No. 209... Registered No. 9.....
 (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 Don Henderson Sawyer Jr. If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? ✓ (5) Number in order of birth 1 (6) Are Parents Married? ✓ (7) DATE OF BIRTH Feb. 21, 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Don Henderson Sawyer Jr.

(9) PRESENT POSTOFFICE OF FATHER Salem, S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 39 (Years)

(12) BIRTHPLACE S.R.

(13) OCCUPATION machinist

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Virian Blynnor Huff

(15) PRESENT POSTOFFICE OF MOTHER Salem, S.C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE S.R.

(19) OCCUPATION House wife

(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 5:30 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. R. McKeen M. D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Salem, 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 Feb 21, 1922 (28) Chas. H. Sawyer 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.