

THIS IS A PERMANENT RECORD. IF TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD. and mark the FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 1.

(1) PLACE OF BIRTH

County of Aiken
 Township of Agnewell
 or
 Inc. Town of
 or
 City of

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

No. for State Registrar Only
5662

Registration District No. 206 Registered No. 10
 (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 Paul Michael

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 - (6) Are Parents Married Yes (7) DATE OF BIRTH March 12th 1923
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Dave Michael
 (9) PRESENT POSTOFFICE OF FATHER Waynes, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 37 (Year)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Black
 (14) Number of children born to mother, including present birth One

MOTHER.
 (14) NAME BEFORE MARRIAGE Minnie Crafton
 (15) PRESENT POSTOFFICE OF MOTHER Waynes, S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 19 (Year)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife Tobacco
 (20) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 10:00 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dr. J. D. ...
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Waynes, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
 (27) Filed March 15 1923 (28) H. Kant 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.