

MARGIN RESERVED FOR BINDING.

WHITE PLAINLY. WITH UPDATING INK—THIS IS 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. THE OTHER, No. 2, etc., in question 5.

McGAW OF COLUMBIA, COLUMBIA, D. C.

(1) PLACE OF BIRTH

County of Sumter
Township of Privateer
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
20317

Registration District No. 44.1.D.4 Registered No. 51.....
(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 Infant Trogon

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

(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet? To be answered only in case of Twins or Triplets	(5) Number to order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>June 27, 27</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>Henry Trogon</u>			(14) NAME BEFORE MARRIAGE <u>Vivian Rhodes</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Manning A. #1</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Manning A. #1</u>	
(10) COLOR OR RACE <u>white</u>			(11) AGE AT LAST BIRTHDAY <u>25</u> (Years)	
(12) BIRTHPLACE <u>Clarendon Co</u>			(16) COLOR OR RACE <u>white</u>	
(13) OCCUPATION <u>House Clerk</u>			(17) AGE AT LAST BIRTHDAY <u>21</u> (Years)	
(18) BIRTHPLACE <u>Lee County</u>			(19) OCCUPATION <u>House Wife</u>	
(20) Number of children born to mother, including present birth <u>Two</u>			(21) Number of children of this mother now living, including present birth <u>Two</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was... alive... at... 4 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. P. Ostrum, M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife
Sumter Co

Given name added from a supplemental report

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

(27) Filed June 30, 1927 (28) James Trogon 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.

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