

(1) PLACE OF BIRTH

County of York

Township of .....

or Town of Rock Hill

or City of SC

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

17135

Registration District No. 4410 Registered No. 82

(For use of Local Registrar)

(2) Full Name of Child. Clara Mae Cook

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

(3) BOY OR GIRL?

(4) Twin or triplet?

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH Feb. 10, 1922

To be answered only in case of Twins or Triplets

(Name of Month) (Day) (Year)

FATHER

MOTHER

(8) FULL NAME J B Cook

(14) NAME BEFORE MARRIAGE Emily Jane Witherspoon

(9) PRESENT POSTOFFICE OF FATHER Rock Hill SC

(15) PRESENT POSTOFFICE OF MOTHER Rock Hill SC

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 44 (Years)

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE NC

(18) BIRTHPLACE SC

(13) OCCUPATION Farmer

(19) OCCUPATION House work

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

(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 4:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) J. R. Miller, M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Rock Hill SC

Given name added from a supplemental report

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

(27) Filed 6/1 1922 (28) J. R. Miller 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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