

## (1) PLACE OF BIRTH

County of WindsburgTownship of King

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

20450

Registration District No. 4503Registered No. 4503

(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 Tyza McColary

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

(3) BOY OR GIRL Girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF

BIRTH June 10, 1922

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Prince McColary(9) PRESENT POSTOFFICE OF FATHER Kingston(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 31 (Years)(12) BIRTHPLACE Windsburg(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 11

## MOTHER.

(14) NAME BEFORE MARRIAGE Hannah Shaw(15) PRESENT POSTOFFICE OF MOTHER Kingston(16) COLOR OR RACE Negro(17) AGE AT LAST BIRTHDAY 32 (Years)(18) BIRTHPLACE Windsburg(19) OCCUPATION Housekeeper(21) Number of children of this mother now living, including present birth 5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Alive at 9 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Sarah Shaw(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Kingston

Given name added from a supplemental report

(26) Witness Prince McColary

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

(27) Filed June 12, 1922(28) Pr. G. G. G. 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.

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.

RECEIVED COLUMBIA, COLUMBIA, S. C.