

(1) PLACE OF BIRTH

County of BarnwellTownship of Barnwell

Inc. Town of

City of

(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

43666

Registration District No. 501 Registered No. 52

(For use of Local Registrar)

(2) Full Name of Child Polly Drake

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

(3) SEX OF CHILD <u>Girl</u>	(4) Type of Infant <u>—</u> To be recorded only in case of Twin or Triplets	(5) Number in order of birth <u>—</u>	(6) Age at Birth <u>4</u> Months	(7) DATE OF BIRTH <u>Oct 29 22</u> (Name of Month) (Day) (Year)
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FATHER

(8) FULL NAME James Hicks

(9) PRESENT RESIDENCE OF FATHER Barnwell, S.C.

(10) COLOR OR RACE W

(11) AGE AT LAST BIRTHDAY 74
(Year)

(12) BIRTHPLACE Barnwell

(13) OCCUPATION Insurance Agent

(14) Number of children born to mother, including present birth 2

MOTHER

(15) NAME BEFORE MARRIAGE Mrs. Cantwell

(16) PRESENT RESIDENCE OF MOTHER Barnwell, S.C.

(17) COLOR OR RACE W

(18) AGE AT LAST BIRTHDAY 72
(Year)

(19) BIRTHPLACE Orangeburg Co.

(20) OCCUPATION H. W.

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born 6:21 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) E. W. Hensley(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Barnwell, 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 Nov 10 23 (28) N. F. Kirkland
Registrar 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.