

MARGIN RESERVED FOR BINDING.
WHITE PLAINLY, WITH UNFADING 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.

(1) PLACE OF BIRTH

County of Georgetown
Township of Calhoun
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

4238

Registration District No. 2105 Registered No. 19
(For use of Local Registrar)

City of (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 Floyd Edison Crabb If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Feb 24 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Wm. L. Coribb
(9) PRESENT POSTOFFICE OF FATHER Hemingway S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40
(Year).....
(12) BIRTHPLACE Georgetown Co S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 9

MOTHER.
(14) NAME BEFORE MARRIAGE Elsa J. Melians
(15) PRESENT POSTOFFICE OF MOTHER Hemingway S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 32
(Year).....
(18) BIRTHPLACE Meliansburg Co S.C.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) N. N. Crabb
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Hemingway S.C.

Given name added from a supplemental report
.....
..... 19

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed March 1 1922 (28) J. L. McCracken
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.