

WRITE 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.

McGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH
County of Anderson
Township of Corner
or
Inc. Town of Iva
or
City of Iva

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

40824

Registration District No. 304

Registered No. 135
(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 James Calhoun Pruitt (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? ✓ (5) Number in order of birth ✓ (6) Are Parents Married? yes (7) DATE OF BIRTH Nov. 5, 1922
(Names of Month) (Day) (Year)

FATHER.
(8) FULL NAME Paul Pruitt
(9) PRESENT POSTOFFICE OF FATHER Iva, S.C.
(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 29
(Years)
(12) BIRTHPLACE Anderson Co. S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 11

MOTHER.
(14) NAME BEFORE MARRIAGE Sophia Jackson
(15) PRESENT POSTOFFICE OF MOTHER Iva, S.C.
(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 28
(Years)
(18) BIRTHPLACE Anderson Co. S.C.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 12:25 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Olga V. Pruitt
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Anderson

Given name added from a supplemental report

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

(27) Filed Jan 10, 1923 (28) J. M. McAdams 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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