

MARGIN RESERVED FOR BINDING.  
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 6.  
MCGRAW HILL BOOK CO. COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Lexington  
Township of Lexington  
or  
Inc. Town of Lexington  
or  
City of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
**19351**

Registration District No. 21-4

Registered No. 34  
(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 William Horace Garis (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>June 17, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME John William Garis  
(9) PRESENT POSTOFFICE OF FATHER Lexington, S.C.  
(10) COLOR OR RACE white  
(11) AGE AT LAST BIRTHDAY 32  
(Year)  
(12) BIRTHPLACE Lexington, S.C.  
(13) OCCUPATION Book Binding  
(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Klara Eddy  
(15) PRESENT POSTOFFICE OF MOTHER Lexington, S.C.  
(16) COLOR OR RACE white  
(17) AGE AT LAST BIRTHDAY 33  
(Year)  
(18) BIRTHPLACE Newberry, S.C.  
(19) OCCUPATION Housewife  
(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 born alive at 29 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. L. K...  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Lexington, 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 June 19, 1922 (28) A. L. K... 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.