

McGraw, of Columbia. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Lancaster
 Township of Youngs
 or
 Inc. Town of
 or
 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

31015

Registration District No. 2908 Registered No. 66
 (For use of Local Registrar)

(No. St. Ward)

(2) Full Name of Child, { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>X</u> <small>To be answered only in case of twins or triplets</small>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>9 - 14 - 22</u> <small>(Name of Month) (Day) (Year)</small>
FATHER		MOTHER		
(8) FULL NAME <u>Blanche M. E. Fortie</u>		(14) NAME BEFORE MARRIAGE <u>Mabel Goodfrey</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>7th Army Woodruff SC</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>7th Army SC</u>		
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>34</u> <small>(Years)</small>	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>33</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>Kansas</u>		(18) BIRTHPLACE <u>SC.</u>		
(13) OCCUPATION <u>Farmer</u>		(19) OCCUPATION <u>Dom</u>		
(20) Number of children born to mother, including present birth { <u>7</u>		(21) Number of children of this mother now living, including present birth { <u>7</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) J. W. Wynn
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report 191..... Registrar	(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) (27) Filed <u>19/10/22</u> (28) <u>R. B. Harris</u> Local Registrar
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*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.