

MAKING RESERVATIONS FOR FUTURE USE. THIS IS A PERMANENT RECORD. WRITE PLAINLY. WITH LEADING INK—THIS IS A PERMANENT RECORD. 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 Greenwood
Township of Walnut Grove
Inc. Town of Waxhaw
City of Waxhaw

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

File No.—For State Registrar Only
4157

Registration District No. 2314 Registered No. 13
(For use of Local Registrar)

(2) Full Name of Child Margaret Evelyn Davis
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jul 7 1923
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME A. B. Davis
(9) PRESENT POSTOFFICE OF FATHER Waxhaw 52
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 23
(12) BIRTHPLACE Anderson Co
(13) OCCUPATION Cotton Gin
(20) Number of children born to mother, including present birth 1

MOTHER.
(14) NAME BEFORE MARRIAGE Myrtle Frederick
(15) PRESENT POSTOFFICE OF MOTHER Waxhaw 52
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21
(18) BIRTHPLACE Oconee Co
(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 10 A. M., on the date above stated. (Born alive or stillborn Hour A. M. or P. M.)

(23) (Signature) W. W. Workman
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Waxhaw 52

Given name added from a supplemental report
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19 ..
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed) Cliff
(27) Filed Mar 10 (28) 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.

Local Registrar.
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