

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 5.

MACAM OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Greenville
Township of Highland
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

34740

Registration District No. 2211 Registered No. 71
(For use of Local Registrar)

(2) Full Name of Child Frances May Sandlin (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 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept. 4, 1922
(Name) (Month) (Day) (Year)

FATHER.

(8) FULL NAME Ernest Sandlin
(9) PRESENT POSTOFFICE OF FATHER Greer SC # 2
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 25
(Year)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Emma Rainey
(15) PRESENT POSTOFFICE OF MOTHER Greer SC # 2
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21
(Year)
(18) BIRTHPLACE North Carolina
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive at 6:40 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) T. B. Morrow
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Campbell St.

Given name added from a supplemental report

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

(27) Filed Oct. 18, 1922 (28) S. J. Wilson 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.