

SEARCHED INDEXED FOR BIRTHS
 WHITE PLAINS, 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.

(1) PLACE OF BIRTH

County of Oconee
 Township of Center
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

5156

Registration District No. 3522 Registered No. 21
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 St. Ward)

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? X (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH 1-28-1922
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Clayth McLean
 (9) PRESENT POSTOFFICE OF FATHER Fair Play
 (10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 22
 (12) BIRTHPLACE Ga
 (13) OCCUPATION farmer
 (20) Number of children born to mother, including present birth 2

MOTHER
 (14) NAME BEFORE MARRIAGE Rosa Brown
 (15) PRESENT POSTOFFICE OF MOTHER Fair Play
 (16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 21
 (18) BIRTHPLACE Ga
 (19) OCCUPATION domestic
 (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.....at.....M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. S. 24
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

 19... Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Feb 27 1922 (28) A. P. Martin 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.

McGraw-Hill, Columbia, S. C.