

FORM NO. 4

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.

McGraw, of Columbia.

(1) PLACE OF BIRTH

County of

Township of

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

89015

Registration District No. 1102 Registered No. 98

(For use of Local Registrar)

(2) Full Name of Child

{ If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

To be answered only in case of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

(Name of Month) (Day) 1917 (Year)

FATHER.

(8) FULL NAME

W. Frank Orr

(9) PRESENT POSTOFFICE OF FATHER

Great Falls S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

31 (Years)

(12) BIRTHPLACE

Chester Co S.C.

(13) OCCUPATION

Cotton Mill work

(20) Number of children born to mother, including present birth

Seven

MOTHER.

(14) NAME BEFORE MARRIAGE

Lasey Price

(15) PRESENT POSTOFFICE OF MOTHER

Great Falls S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

33 (Years)

(18) BIRTHPLACE

Fairfield Co S.C.

(19) OCCUPATION

Domestic

(21) Number of children of this mother now living, including present birth

Seven

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was

(Born alive or stillborn)

(Hour A. M. or P. M.)

(23) (Signature)

J. B. McLeod M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Physician Great Falls S.C.

Given name added from a supplemental report

1917

Registrar

(26) Witness

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

(27) Filed

1/12

1917

(28)

R. T. Harwood

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.

stillbirths before the