

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.

McGAW OF COLUMBIA, COLUMBIA, E. C.

(1) PLACE OF BIRTH

County of Laurens
Township of Pleasant Hill
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

Registration District No. 2816 Registered No. 74
(For use of Local Registrar)

File No.—For State Registrar Only
15544

(2) Full Name of Child

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

3) BOY OR GIRL? <u>Boy</u>	4) Twin or Triplet?	5) Number in order of birth	6) Are Parents Married? <u>yes</u>	7) DATE OF BIRTH <u>May 13 1922</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
8) FULL NAME <u>Cecily Patterson</u>			14) NAME BEFORE MARRIAGE <u>Lottie Walker</u>	
9) PRESENT POSTOFFICE OF FATHER <u>Heath Spring S.C.</u>			15) PRESENT POSTOFFICE OF MOTHER <u>Heath Spring S.C.</u>	
10) COLOR OR RACE <u>Mulatto</u>			16) COLOR OR RACE <u>Black</u>	
11) AGE AT LAST BIRTHDAY <u>26</u> (Years)			17) AGE AT LAST BIRTHDAY <u>26</u> (Years)	
12) BIRTHPLACE <u>Laurens Co.</u>			18) BIRTHPLACE <u>Laurens Co.</u>	
13) OCCUPATION <u>Drayman for mer co.</u>			19) OCCUPATION <u>Domestic</u>	
20) Number of children born to mother, including present birth <u>4</u>			21) Number of children of this mother now living, including present birth <u>4</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 P.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Easter Turner

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Heath Spring S.C.

Given name added from a supplemental report

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

(27) Filed May 13 1922 (28) E. F. Hammond 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.

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