

WHILE IN PAID, WITH INPATIENT INSURANCE, THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS, state the sex of each child, and mark the
PLANT-BLANK, No. 1, THIS OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Spartanburg
Township of Cross
or
Inc. Town of
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

2514

Registration District No. 4, 003

Registered No. 9
(For use of Local Registrar)

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

(2) Full Name of Child John Redmond Franklin

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet? No

(5) Number in order of birth 1
To be answered only in case of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Jan 9 1922
(Month) (Day) (Year)

FATHER.

(8) FULL NAME John Redmond Franklin

(9) PRESENT POSTOFFICE OF FATHER Sumter S.C. #2

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 42 (Year)

(12) BIRTHPLACE Cross Keys, Marion Co., S.C.

(13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Eula Estene Parkman

(15) PRESENT POSTOFFICE OF MOTHER Sumter, S.C. #2

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Year)

(18) BIRTHPLACE Cross Keys, Spartanburg Co., S.C.

(19) OCCUPATION at home

(20) Number of children born to mother, including present birth 2

(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 Sumter on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. B. Patton

(24) State Physician or Midwife

(25) Address of Physician or Midwife Cross Keys 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 Jan 11 1922

(28) C. D. Hammett

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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