

MARGIN RESERVED FOR BINDING.
WHITE PLAINLY, WITH LEADING 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 THIS OTHER, No 2, etc., in question 5.

McGAW OF COLUMBIA, COLUMBIA S. C.

(1) PLACE OF BIRTH

County of Wayne
Township of Lawrenceville
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

19449

Registration District No. 3300 Registered No. 28
(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Lucie Elizabeth Smith (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 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 15th 1922
(Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Robertson Smith

9) PRESENT POSTOFFICE OF FATHER Lawrenceville S.C.

10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 22 (Years)

12) BIRTHPLACE I.C.

13) OCCUPATION Farming

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

MOTHER.

(14) NAME BEFORE MARRIAGE Lillian Mae Peterkin

(15) PRESENT POSTOFFICE OF MOTHER Lawrenceville S.C.

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 22 (Years)

(18) BIRTHPLACE I.C.

(19) OCCUPATION Farm Labor

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 10 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Delia Turner

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Rockingham N.C.

Given name added from a supplemental report

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

(27) Filed June 22 (28) 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.