

No. 3

PLACE OF BIRTH

City of Franklin  
 County of Franklin  
 Town of Franklin  
 No. 1225 (No. of 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

17548

Registration District No. 1225 Registered No. 30  
 (For use of Local Registrar)

Full Name of Child Carroll Lee E. Jr. (If child is not yet named, make supplemental report as directed)

4) Twin or Triplet? X (5) Number in order of birth 4 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 23  
 To be answered only in event of Twin or Triplet (Specify of Month) (Day) (Year)

## FATHER.

## MOTHER.

(14) NAME BEFORE MARRIAGE Clara Wilson  
 (15) PRESENT POSTOFFICE OF MOTHER Wilmington  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27  
 (18) BIRTHPLACE Franklin, S.C.  
 (19) OCCUPATION Teacher  
 (21) Number of children of this mother now living, including present birth 3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive or stillborn at 6 M., on the date above stated. (Hour A. M. or P. M.)

(22) (Signature) Carroll Lee E. Jr. (23) Address of Physician or Midwife Franklin, S.C.  
 (24) State whether Physician or Midwife Physician

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

(27) Filed June 23 (28) Local Registrar

On 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.