

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town ofor
City of Grinnell

(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

24522

Registration District No. 22A Registered No. 404

(For use of Local Registrar)

(No. 309 Phila St St.) Ward)(2) Full Name of Child William Edgar Crane

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

(3) SEX OF CHILD <u>Boy</u>	(4) Type of Twins <u>1</u> To be answered only in case of Twins or Triplets	(5) Number in order of birth <u>2</u>	(6) Age of Parent <u>3</u>	(7) DATE OF BIRTH <u>Aug 7 1923</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Ray Edgar Crane(9) PRESENT POSTOFFICE OF FATHER Grinnell SC(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 23
(Year)(12) BIRTHPLACE U.S.(13) OCCUPATION machinist(14) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Montine Wright(15) PRESENT POSTOFFICE OF MOTHER same(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 20
(Year)(18) BIRTHPLACE U.S.(19) OCCUPATION Domestic(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 7 A.M. on the date above stated. (Hour A. M. or P. M.)(23) (Signature) [Signature]

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife [Address]

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Aug 21 1923 (28) [Signature] 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.

-and as programmer.