

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
McCAIG OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Aiken
Township of Mulhens #8
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
20704

Registration District No. 207 Registered No. 35
(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 Judith Edwards Inabinet (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u> <small>To be answered only in event of Twins or Triplets</small>	(5) Number in order of birth <u>39</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 13 1922</u> <small>(Name of Month) (Day) (Year)</small>
FATHER			MOTHER	
(8) FULL NAME <u>William Inabinet</u>			(14) NAME BEFORE MARRIAGE <u>Rosa Mills</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Talatha, D.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Talatha, D.C.</u>	
(10) COLOR OR RACE <u>W</u>			(17) AGE AT LAST BIRTHDAY <u>34</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>Aiken Co. D.C.</u>			(18) BIRTHPLACE <u>Aiken Co.</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Housewife</u>	
(20) Number of children born to mother, including present birth <u>2</u>			(21) Number of children of this mother now living, including present birth <u>2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 6:15 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) B. J. Wymann
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Aiken, D.C.

Given name added from a supplemental report

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

(27) Filed July 15 1922 (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.

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