

(1) PLACE OF BIRTH

County of OrangeburgTownship of CityOR
Inc. Town ofOR
City of Orangeburg

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

(2) Full Name of Child Ethel May McDanielFile No.—For State Registrar Only
43937Registration District No. 31-a Registered No. 187
(For use of Local Registrar)(No. 31 Meeting St.; Ward)

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

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>1</u> To be answered only in event of Twins or Triplets	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec 9, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Larry McDaniel(9) PRESENT POSTOFFICE OF FATHER Orangeburg S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 55
(Years)(12) BIRTHPLACE Cleveland Co. N.C.(13) OCCUPATION mill operator(20) Number of children born to mother, including present birth Seven

MOTHER.

(14) NAME BEFORE MARRIAGE Lizzie Martin(15) PRESENT POSTOFFICE OF MOTHER Orangeburg S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 40
(Years)(18) BIRTHPLACE Lexington Co. S.C.(19) OCCUPATION mill operator(21) Number of children of this mother now living, including present birth Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:35 P.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. A. Jeffries

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

PhysicianOrangeburg 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 12-22-1922 (28) J. A. Jeffries
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.*When there was no attending physician or midwife, then the father, householder, etc., should make this return.
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