

(1) PLACE OF BIRTH

County of KershawTownship of DeKalb

or

Inc. Town of _____

or

City of _____

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 2701

File No. - For State Registrar Only

1673Registered No. 17

(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

John Baykin Jr.

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet

(5) Number in order of birth

(6) Sex: Male Female

(7) DATE OF BIRTH

Jan 19 1922

(Month) (Day) (Year)

FATHER

(8) FULL NAME

John Baykin

(9) PRESENT POSTOFFICE OF FATHER

Causey

(10) COLOR OR RACE

Col

(11) AGE AT LAST BIRTHDAY

38

(12) BIRTHPLACE

Mo

(13) OCCUPATION

Farmer

MOTHER

(14) NAME BEFORE MARRIAGE

Mary Stratford

(15) PRESENT POSTOFFICE OF MOTHER

Causey

(16) COLOR OR RACE

Col

(17) AGE AT LAST BIRTHDAY

32

(18) BIRTHPLACE

Mo

(19) OCCUPATION

Housewife

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

9

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

9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 2:30 P.M. on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature)

Blair McKee

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife - Causey

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Jan 27 1922

(28) Local Registrar

W. S. McKee

When there was no attending physician or midwife for the father, householder, etc., should make this return. If a child is borned even once, the father should be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.