

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

MEANS OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Lexington
Township of Cherryfield
or
Inc. Town of
or
City of Batesburg, SC.
(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 Only
23036

Registration District No. 3104 Registered No. 37
(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL? girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 6, 1922
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Curren B. Sproddy
(9) PRESENT POSTOFFICE OF FATHER Batesburg, SC.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 21 (Years)
(12) BIRTHPLACE Lexington County
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth One

(14) NAME BEFORE MARRIAGE Eltie Pauline Younce
(15) PRESENT POSTOFFICE OF MOTHER Batesburg, SC.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 19 (Years)
(18) BIRTHPLACE Aiken
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 12:30 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) K. L. Ate (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Batesburg, SC.

Given name added from a supplemental report

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

(27) Filed May 2, 1922, (28) S. J. Altman 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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