

(1) PLACE OF BIRTH

County of GreenvilleTownship of Batesor
Inc. Town ofor
City of

(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

18764

Registration District No. 2201 Registered No. 34

(For use of Local Registrar)

City of

2) Full Name of Child Frankie Baynell

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

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>No</u>	(7) DATE OF BIRTH <u>June 26, 1911</u>
				(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Walter McCanley(9) PRESENT POSTOFFICE OF FATHER Travellers Rest 3(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)(12) BIRTHPLACE Greenville(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth. 3

MOTHER.

(14) NAME BEFORE MARRIAGE Etta Kora Adkins(15) PRESENT POSTOFFICE OF MOTHER Travellers Rest 3(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)(18) BIRTHPLACE Spartanburg(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth. 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 9.5 P. (Hour A. M. or P. M.) on the date above stated.(23) (Signature) R. P. Workman M.D.(24) State whether Physician or Midwife (25) Address of Physician or Midwife Travellers Rest 3

Given name added from a supplemental report

191...

Registrar

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

(27) Filed June 27, 1911 (28) 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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