

(1) PLACE OF BIRTH

County of Darlington

Township of Great Neck

Inc. Town of

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

No. for State Registrar Only

43686

Registration District No. 5, P. 4 Registered No.
(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) Type or Triplet To be covered only in case of Triplet 5) Number in order of birth 6) Are twins or triplets yes 7) DATE OF BIRTH Oct 6 1942
(Name of month) (Day) (Year)

FATHER
8) FULL NAME May Ketch

MOTHER
14) NAME BEFORE MARRIAGE Maggie Blackburn

9) PRESENT RESIDENCE OF FATHER Columbia, S.C.

16) PRESENT RESIDENCE OF MOTHER Blaine S.C.

10) COLOR OR RACE white 11) AGE AT LAST BIRTHDAY 25
(Year)

16) COLOR OR RACE white 17) AGE AT LAST BIRTHDAY 18
(Year)

12) BIRTHPLACE Georgia

18) BIRTHPLACE S.C.

13) OCCUPATION Automotive Electrician

19) OCCUPATION Housewife

20) Number of children born to mother, including present birth 1

21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born

on the date above stated.

(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed 19

(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.

*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.