

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.
MACAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Cherokee
Township of Mountain
OR
Inc. Town of
OR
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar

41504

Registration District No. 1023 Registered No. 148
(For use of Local Registrar)

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

(2) Full Name of Child Ellen Lorene Gaffney 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 Dec. 14, 1922
(Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>J. H. Gaffney</u>	(14) NAME BEFORE MARRIAGE <u>L. M. Parster</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Gaffney St. R. #1</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Gaffney St. R. #1</u>
(10) COLOR OR RACE <u>white</u>	(16) AGE AT LAST BIRTHDAY <u>44</u> (Years)	(16) COLOR OR RACE <u>white</u>	(17) AGE AT LAST BIRTHDAY <u>41</u> (Years)
(12) BIRTHPLACE <u>Mo. Co.</u>	(18) BIRTHPLACE <u>Mo. Co.</u>	(13) OCCUPATION <u>Farmer</u>	(19) OCCUPATION <u>Domestic</u>
(20) Number of children born to mother, including present birth <u>10</u>	(21) Number of children of this mother now living, including present birth <u>9</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was a. female at 3 P. M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mrs. J. J. Sarra (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Gaffney St. R. #1

Given name added from a supplemental report

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

(27) Filed Dec. 27, 1922 (28) H. P. Critchard 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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