

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.

McGraw-Hill Publishing Co., Inc., New York, N. Y.

(1) PLACE OF BIRTH

County of Anderson
Township of Candler
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. 304 Registered No. 130
(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.)

File No.—For State Registrar On
40820

(2) Full Name of Child

David David Clinkscale
child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? L (5) Number in order of birth 7 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 20 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Frank Clinkscale
(9) PRESENT POSTOFFICE OF FATHER na O.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24
(Years)
(12) BIRTHPLACE South Carolina
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Sarah Jane Pinder
(15) PRESENT POSTOFFICE OF MOTHER na O.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18
(Years)
(18) BIRTHPLACE South Carolina
(19) OCCUPATION House wife
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was white at 7:30 M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. H. Burton M.D.
(24) State whether Physician or Midwife (25) Address of Physician or Midwife na O.C.

Given name added from a supplemental report
.....
.....
..... 19.....
Registrar

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Dec 19 1922 (28) J. H. McAdams
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.

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.