

## PLACE OF BIRTH

City of Marbleboro  
 County of Red Bluff  
 Town of McCall

## CERTIFICATE OF BIRTH

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

File - For State Registrar Only

5040

Registration District No. 3305Registered No. 4  
(For use of Local Registrar)

Name of Child Flora Beatrice Graham (No. .... Sub. .... Ward) (For use of Local Registrar)  
 Date of Birth Jan 26 1922 (For use of Local Registrar)

Sex Girl

Age at Birth 0 (For use of Local Registrar)  
 To be reported only in event of Twin or Triplet

Is the child named after a living person? Yes  
 If so, name of person Yes

DATE OF BIRTH Jan 26 1922  
 (For use of Local Registrar)

## FATHER.

NAME OF FATHER Edmond Graham

PRESENT RESIDENCE OF FATHER McCall SC

(1) COLOR White (11) AGE AT LAST BIRTHDAY 22  
 (2) FACE White (12) (Yes)

(13) BIRTHPLACE Gibson NC

(14) OCCUPATION Cotton mill work

(15) Number of children born to mother, including present birth 2

## MOTHER.

(16) NAME OF MOTHER Edna Butler

(17) PRESENT RESIDENCE OF MOTHER McCall SC

(18) COLOR White (19) AGE AT LAST BIRTHDAY 21  
 (20) FACE White (21) (Yes)

(22) BIRTHPLACE Lansburg, N.C.

(23) OCCUPATION Domestic

(24) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(25) I hereby certify that I attended the birth of this child, who was Born alive at 7:12 AM, on the date above stated. (Specify alive or stillborn) (Hour A. M. or P. M.)

(26) (Signature) Douglas Haines  
 (27) State whether Physician or Midwife Physician (28) Address of Physician or Midwife McCall SC

Given name added from a supplemental report

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

(30) Filed Jan 30 1922 (31) H. Weatherly 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.

MARGIN RESERVED FOR NOTES  
 WRITING PLAINLY, WITH CARE AND PRECISION, IN INK, IN BLUE OR BLACK INK, IN CASE OF TWIN OR TRIPLETS USE A SEPARATE CARD FOR EACH CHILD.  
 FIRST-BORN, NO. 1, THE OTHERS, NO. 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.