

THIS IS A PERMANENT RECORD.
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
MEGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Pickens
Township of Easley
or
Inc. Town of Easley
or
City of

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

File No.—For State Registrar Only
31778

Registration District No. 31-a Registered No. 125
(For use of Local Registrar)
(No. Harold) St.; Ward)

(2) Full Name of Child Charles Harold Cox
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(If child is not yet named, make supplemental report as directed)

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|-------------------------------|--|--|--|--|
| (3) BOY OR GIRL <u>Boy</u> | (4) Twin or Triplet? <u>No</u> To be answered only in event of Twins or Triplets | (5) Number in order of birth <u>1</u> | (6) Are Parents Married? <u>Yes</u> | (7) DATE OF BIRTH <u>Sep 21, 1922</u> (Name of Month) (Day) (Year) |
|-------------------------------|--|--|--|--|

FATHER
(8) FULL NAME Meridith D. Cox
(9) PRESENT POSTOFFICE OF FATHER Easley S.C.
(10) COLOR OR RACE White
(11) AGE AT LAST BIRTHDAY 51
(12) BIRTHPLACE Greenville
(13) OCCUPATION Merchant
(20) Number of children born to mother, including present birth 5

MOTHER
(14) NAME BEFORE MARRIAGE Dra Anna Waldorf
(15) PRESENT POSTOFFICE OF MOTHER Easley S.C.
(16) COLOR OR RACE White
(17) AGE AT LAST BIRTHDAY 47
(18) BIRTHPLACE Greenville
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 11:30 A.M. on the date above stated.
(23) (Signature) M. J. P. M.
(24) State whether Physician or Midwife Midwife
(25) Address of Physician or Midwife Easley S.C.
Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question 23 is signed for mark)
(27) Filed Oct 2, 1922 (28) R. H. Hyatt 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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