

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.

McGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Cherokee

Township of

or

Inc. Town of

or

City of Gaffney, S.C.

(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

File No.—For State Registrar Only

25302

Registration District No. 10A Registered No. 184

(For use of Local Registrar)

(No. W. Robinson St.; 2 Ward)

(2) Full Name of Child Robert Avant M. Crawford

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy

(4) Twin or Triplet?

To be answered only in case of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF

BIRTH Aug. 18, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Robert Avant M. Crawford

(9) PRESENT POSTOFFICE OF FATHER

Gaffney, S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

30
(Years)

(12) BIRTHPLACE

Cleveland Co. N.C.

(13) OCCUPATION

Bookkeeper

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

One

MOTHER.

(14) NAME BEFORE MARRIAGE

Atta Olie Blanton

(15) PRESENT POSTOFFICE OF MOTHER

Gaffney, S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

30
(Years)

(18) BIRTHPLACE

Cleveland Co. N.C.

(19) OCCUPATION

House work

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

One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 10:30 on the date above stated.
(Born alive or stillborn) * (Hour, M. or P. M.)

(23) (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

Sept. 11, 1922

(28)

N. F. Smith
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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