

MARGIN RESERVED FOR INDEXING.
WRITE PLAINLY, WITH PRINTING INK—THIS IS A PERMANENT RECORD.
In case of TWINS OR TRIPLETS, INDICATE MEANIC FOR EACH CHILD, and make the
FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.
MEDICAL COLLEGE, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Lee

Township of Cherokeeville

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. 3.113

File No.—For State Registrar Only

19323

Registered No. 32
(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.)

(2) Full Name of Child No name

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

3. BOY OR GIRL u

4. Twin or Triplet?

(5) Number in order of birth 5

(6) Are Parents Married? yes

(7) DATE OF BIRTH

June 24, 1922
(Name of Month) (Day) (Year)

FATHER.

8. FULL NAME E. A. ...

9. PRESENT POSTOFFICE OF FATHER ...

(10) COLOR OR RACE ...

(11) AGE AT LAST BIRTHDAY 28
(Years)

12. BIRTHPLACE ...

13. OCCUPATION ...

MOTHER.

(14) NAME BEFORE MARRIAGE ...

(15) PRESENT POSTOFFICE OF MOTHER ...

(16) COLOR OR RACE ...

(17) AGE AT LAST BIRTHDAY 20
(Years)

(18) BIRTHPLACE ...

(19) OCCUPATION ...

20. Number of children born to mother, including present birth (5)

(21) Number of children of this mother now living, including present birth (4)

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) ...

(24) State whether Physician or Midwife 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 June 26, 1922

(28) ...

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.