

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—In case of TWIN OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.

Division of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of
Township of Cantonville
of
Inc. Town of
or
City of

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

Registration District No.

No. for State Registrar Only

5817

Registered No.
(For use of Local Registrar)

(2) Full Name of Child

Claude V. Flagg

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet 1

(5) Number in order of birth 1

(6) Are Parents Married Yes

(7) DATE OF BIRTH Feb 11 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Claude J. Flagg

(9) PRESENT POSTOFFICE OF FATHER Commerce Ga

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32
(Year)

(12) BIRTHPLACE Ga

(13) OCCUPATION Electrician

(14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Retha Childs

(15) PRESENT POSTOFFICE OF MOTHER Commerce Ga

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 16
(Year)

(18) BIRTHPLACE Ga

(19) OCCUPATION House wife

(20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was... Alive ...at... 1 P. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) C. B. ...

(23) State whether Physician or Midwife

(24) Address of Physician or Midwife Anderson

Given name added from a supplemental report

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

(26) Filed (27) Local Registrar W. H. ...

*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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