

MARGIN RESERVED FOR BINDING.

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.

Revised by Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Laurens

Township of

or Inc. Town of Cross Hill

or City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

John Grogans Jr.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

35223

Registration District No. 2900 Registered No. 37

(For use of Local Registrar)

(No. St. Ward)

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 Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF

BIRTH Dec 20 1922

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

John Grogans

(9) PRESENT POSTOFFICE OF FATHER

Cross Hill S.C.

(10) COLOR OR RACE

Black(11) AGE AT LAST BIRTHDAY 27 (Year)

(12) BIRTHPLACE

SC

(13) OCCUPATION

Farm Laborer

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

One

MOTHER.

(14) NAME BEFORE MARRIAGE

Delia Richey

(15) PRESENT POSTOFFICE OF MOTHER

Cross Hill SC

(16) COLOR OR RACE

Black(17) AGE AT LAST BIRTHDAY 15 (Year)

(18) BIRTHPLACE

SC

(19) OCCUPATION

Farm Laborer

(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 Born alive at 11 P. M. on the date above stated. (Born alive or stillborn) (Hour A. 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

Oct 23 1922

(28)

P. B. Grogans 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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