WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
X. 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 3.

(1) PLACE OF BIRTH

County of Newberry

Township of #4

or Inc. Town of Whitmire

or City of R + D #1

(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: 33262

Registration District No. 3402 Registered No. 103 (For use of Local Registrar)

(No. ..... St.; ..... Ward)

(2) Full Name of Child Fannie Clary

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

(3) BOY OR GIRL?	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH (Name of Month) (Day) (Year)
Girl	a	—	Yes	Sept 18 1923

FATHER.

(8) FULL NAME: Frank Clary

(9) PRESENT POSTOFFICE OF FATHER: Whitmire S C

(10) COLOR OR RACE: Black (11) AGE AT LAST BIRTHDAY: 36 (Years)

(12) BIRTHPLACE: Whitmire S C

(13) OCCUPATION: Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE: Fannie Byrd

(15) PRESENT POSTOFFICE OF MOTHER: Whitmire S C

(16) COLOR OR RACE: Black (17) AGE AT LAST BIRTHDAY: 34 (Years)

(18) BIRTHPLACE: Whitmire S C

(19) OCCUPATION: Domestic

(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 Alive (Born alive or stillborn) at 4 30 A. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Isaac Rice

(24) State whether Physician or Midwife: Midwife (25) Address of Physician or Midwife: Whitmire S C R + D #1

Given name added from a supplemental report

..... 19....
Registrar

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

(27) Filed Oct 15 1923 (28) R M Durant
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.

Bureau of Columbia, S. C.