

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.

MACAW OF COLUMBIA, COLUMBIA, S. C.

N. 1

(1) PLACE OF BIRTH

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

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

File No.—For State Registrar Only
20598

Registration District No. 4408 Registered No. 88
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(No. St.; Ward)

(2) Full Name of Child

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

(3) SEX OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
	To be answered only in case of Twins or Triplets	<u>7</u>	<u>Yes</u>	<u>June 14</u> 19 <u>22</u> (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME H. Franklin Playlock

(9) PRESENT POSTOFFICE OF FATHER York A. F. D.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 43 (Years)

(12) BIRTHPLACE Montgomery Co Md.

(13) OCCUPATION Mill Operator

(20) Number of children born to mother, including present birth 9

MOTHER.

(14) NAME BEFORE MARRIAGE Eda Lester

(15) PRESENT POSTOFFICE OF MOTHER York A. F. D.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 39 (Years)

(18) BIRTHPLACE Taunton So Md.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 3 P. M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. A. Bratton

(24) State whether Physician or Midwife (25) Address of Physician or Midwife
York S.C.

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 June 14 1922 (28) John J. Barnes
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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