

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

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.

DEPARTMENT OF COMMERCE, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Clarendon
Township of Clarendon
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

28527

Registration District No. 201

Registered No. 48
(For use of Local Registrar)

(2) Full Name of Child

Quinn Catherine

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 12 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 17 1922
(If birth occurs in a hospital or other institution, give name of same instead of street and number.) (If child is not yet named, make supplemental report as directed)

FATHER
(8) FULL NAME Quinn C. McKinnon
(9) PRESENT POSTOFFICE OF FATHER McKinnon S.C.
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 27 (Years)
(12) BIRTHPLACE Clarendon Co. S.C.
(13) OCCUPATION Farming
(14) Number of children born to mother, including present birth 12

MOTHER
(14) NAME BEFORE MARRIAGE Carrie Lockhart
(15) PRESENT POSTOFFICE OF MOTHER McKinnon S.C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 32 (Years)
(18) BIRTHPLACE Clarendon Co. S.C.
(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 Alive at 5 9 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Wm. Jackson
(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 mother)

(27) Filed Sept 20 1922 (28) F. H. Cook 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.