

No. 1

(1) PLACE OF BIRTH

County of Harvey
 Township of Flagler
 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

41043

Registration District No. 4106 Registered No. 628
 (For use of Local Registrar)

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

(2) Full Name of Child Mac R. Eldon Mc Crackin If child is not yet named, make supplemental report as directed

(a) BOY OR GIRL Boy (b) Twin or Triplet No (c) Number in order of birth 1 (d) Age of Parent Married yes (e) DATE OF BIRTH Dec. 27, 1923
 (Name of Month) (Day) (Year)

FATHER.

(a) FULL NAME Mitchel Mc Crackin
 (b) PRESENT POSTOFFICE OF FATHER Nichols
 (c) COLOR OR RACE white (d) AGE AT LAST BIRTHDAY 34
 (Year)
 (e) BIRTHPLACE Harvey County
 (f) OCCUPATION Farming
 (g) Number of children born to mother, including present birth 5

MOTHER.

(a) NAME BEFORE MARRIAGE Annamah Small
 (b) PRESENT POSTOFFICE OF MOTHER Nichols
 (c) COLOR OR RACE white (d) AGE AT LAST BIRTHDAY 33
 (Year)
 (e) BIRTHPLACE Harvey County
 (f) OCCUPATION Farming
 (g) 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 born alive at 10:00 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Miss W. J. Nichols (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Se.

Given name added from a supplemental report

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

(27) Filed Jan 2 1924 (28) G. F. Lee Local Registrar.

When there was no attending physician or midwife, then the father, householder, etc., make this return. If a child breathes even once, it must not be reported as stillborn. No report is needed of stillbirths before the fifth month of pregnancy.