

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.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>Kershaw</u>		STATE OF SOUTH CAROLINA		35085	
Township of <u>Fugate</u>		Bureau of Vital Statistics			
OR		State Board of Health			
Inc. Town of		Registration District No. <u>27</u>		Registered No.	
OR				(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 <u>Don</u>		Child is not yet named, make supplemental report as directed			
(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Oct 5 1922</u>	
To be answered only in case of Twin or Triplet					
FATHER.			MOTHER.		
(8) FULL NAME <u>Daniel Clayborn</u>			(14) NAME BEFORE MARRIAGE <u>Essie Fleming</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Fugate</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Fugate</u>		
(10) COLOR OR RACE <u>Black</u>			(16) COLOR OR RACE <u>Black</u>		
(11) AGE AT LAST BIRTHDAY <u>19</u>			(17) AGE AT LAST BIRTHDAY <u>18</u>		
(12) BIRTHPLACE <u>Kershaw</u>			(18) BIRTHPLACE <u>Kershaw</u>		
(13) OCCUPATION <u>Farming</u>			(19) OCCUPATION <u>Farming</u>		
(20) Number of children born to mother, including present birth <u>One</u>			(21) Number of children of this mother now living, including present birth <u>One</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.					
(22) I hereby certify that I attended the birth of this child, who was <u>Wendy</u> , <u>2</u> at <u>6 P.</u> M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>affid.</u>		(24) State <u>South Carolina</u>		(25) Address of Physician or Midwife <u>Walter Fortune</u>	
(26) Given name added from a supplemental report <u>M. R. Woodward</u>		(27) Witness <u>H. L. Fortune</u>		(28) Address of Witness <u>Fugate</u>	
<u>10/11/42</u>		(29) Filed <u>Oct 11 1922</u>		(30) Local Registrar <u>Wm. D. G. G. G.</u>	
When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.					

Revised by Columbia, Columbia, S. C.