

FORM NO. 6
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 6.

McGraw-Hill of Columbia

(1) PLACE OF BIRTH

County of Orangeburg

Township of

or
Inc. Town of

or
City of Orangeburg

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child, By Court Order 6/11/73: Michael Sweeting

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA,

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

91193

Registration District No. 36a

Registered No. 194

(For use of Local Registrar)

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, By Court Order 6/11/73: Michael Sweeting

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? X (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov. 11, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Mr. Ryan

(9) PRESENT POSTOFFICE OF FATHER Columbia, S.C.

(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 23
(Years)

(12) BIRTHPLACE Green

(13) OCCUPATION Clerk

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

MOTHER.

(14) NAME BEFORE MARRIAGE Blanche Bolin

(15) PRESENT POSTOFFICE OF MOTHER Orangeburg, S.C.

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

(18) BIRTHPLACE Orangeburg, S.C.

(19) OCCUPATION Housewife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Julius A. Park

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

Given name added from a supplementary report

X.P.O. # 5958

6/25/73

Registrar

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

(27) Filed Jan 5, 1917 (28) W. H. Duke
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.