

RECORD OF BIRTHS FOR BINDING. NATIONAL BUREAU OF VITAL STATISTICS. THIS IS A PERMANENT RECORD. WITHIN PLACES. WHEN NECESSARY, SEPARATE PLANS FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc. In question 3

(1) PLACE OF BIRTH

County of Lexington  
Township of South Wamp  
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

86477

Registration District No. 3107 Registered No. 123  
(For use of Local Registrar)

(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

Leonard Franklin (If child is not yet named, make supplemental report as directed)

3. BOY OR GIRL Boy (4) Twin or Triplet No (5) Number in or Jar of birth 1  
To be answered only in case of Twins or Triplets

(6) Are Parents Married Yes (7) DATE OF BIRTH Feb Col 1916  
(Name of Month) (Day) (Year)

FATHER.

8. FULL NAME William Goodwin

9. PRESENT POSTOFFICE OF FATHER Durham

10. COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28

12. BIRTHPLACE S.C.

13. OCCUPATION A. S. Keen

20. Number of children born to 4 including present birth

MOTHER.

(14) NAME BEFORE MARRIAGE Ellie Sharpe

(15) PRESENT POSTOFFICE OF MOTHER Durham

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30  
(Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born at 11 P. M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dr. J. H. Ford

(24) State whether Physician or Midwife mid (25) Address of Physician or Midwife mid

Given name added from a supplemental report

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

(27) Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make the report. If a child breathes even once, it must not be recorded as stillborn. No report is desired of stillbirths before the ninth month of pregnancy.