

(1) PLACE OF BIRTH

County of Abbeville
 Township of Abbeville

or
 Inc. Town of
 or
 City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

5582

2) Full Name of Child Turn Loran If child is not yet named, make supplemental report as directed

3) BOY OR GIRL Boy (4) Twin or Triplet? (5) Number in order of birth

to be answered only in case of twins or triplets

FATHER.

1) FULL NAME George Loran

2) PRESENT RESIDENCE OF FATHER Abbeville, S.C. R 3 P

3) COLOR OR RACE Blk. (11) AGE AT LAST BIRTHDAY 25 (Years)

4) BIRTHPLACE Ga.

5) OCCUPATION Farmer

6) Number of children born to mother, including present birth One

(6) Are Parents Married? no (7) DATE OF BIRTH Mar 22 1923 (Name of Month) (Day) (Year)

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Johnson

(15) PRESENT POSTOFFICE OF MOTHER Abbeville, S.C. R 3 P

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

(18) BIRTHPLACE Ga.

(19) OCCUPATION Housewife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

22) I hereby certify that I attended the birth of this child, who was born alive 7 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

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

Midwife Abbeville, S.C.

Given name added from a supplemental report

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

(27) Filed Mar 22 1923 (28) [Signature] 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.

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THIS IS A PRELIMINARY RECORD. IN CASE OF TWINS OR TRIPLETS, USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, AND THE OTHERS, NO. 1, 2, 3, ETC., IN QUESTION 5.

Only

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3

7

M.,
P. M.)

wife

far.