

Form No. 1

## (1) PLACE OF BIRTH

County of RichlandTownship of Loweror  
Inc. Town of .....or  
City of .....

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

(2) Full Name of Child Daniel Taylor

File No.—For State Registrar Only

32001

Registration District No. 3803Registered No. 2031  
(For use of Local Registrar)

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

6

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Sept 16 1922

(Name of Month) (Day) (Year)

(8) FULL NAME

Walter Taylor

(9) PRESENT POSTOFFICE OF FATHER

Congare

(10) COLOR OR RACE

negro

(11) AGE AT LAST BIRTHDAY

30  
(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Farmer

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

6

MOTHER

(14) NAME BEFORE MARRIAGE

Lizzie Jacobs

(15) PRESENT POSTOFFICE OF MOTHER

Congare

(16) COLOR OR RACE

negro

(17) AGE AT LAST BIRTHDAY

26  
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Housewife

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

5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 3:20 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23)

(Signature)

Sarah Salmons

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Congare

Given name added from a supplemental report

(26) Witness

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

(27) Filed Sept. 15 1922(28) J. P. Harick

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.

NOTE: 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.

RECEIVED OF COLUMBIA, COLUMBIA, S. C.