

Form No 1.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Pickens

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Township of Union

or

Ine. Town of

or

City of

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

Registration District No. 3214 Registered No. 61

File No.—For State Registrar Only
65936

(For use of Local Registrar)

(2) Full Name of Child Lora Gignallat Craig

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

(3) BOY OR GIRL?

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

To be answered only in case of Twins or Triplets

(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME

(14) NAME BEFORE MARRIAGE

(9) PRESENT POSTOFFICE OF FATHER

(15) PRESENT POSTOFFICE OF MOTHER

(10) COLOR OR RACE

(11) AGE AT LAST BIRTHDAY

(16) COLOR OR RACE

(17) AGE AT LAST BIRTHDAY

(12) BIRTHPLACE

(18) BIRTHPLACE

(13) OCCUPATION

(19) OCCUPATION

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

(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 Alive at 4 3 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Edw. A. Woodruff

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

Physician

Cotterman

Given name added from a supplemental report

(26) Witness

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

Registrar

(27) Filed July 7, 1914

(28) J. M. Harrell 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.

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.

Craw, of Columbia