MARGIN [illegible] RD FOR BINDING.
WRITE PLAINLY, WITH UNFAIRN 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.

McCALY OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Clarendon

Township of Manning

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
854

Registration District No. 1307 Registered No. 2
(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 Lizzie McLeod — If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl
(4) Twin or Triplet? —
(5) Number in order of birth —
To be answered only in event of Twins or Triplets
(6) Are Parents Married? Yes
(7) DATE OF BIRTH Jan 23 1922 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME Geo Thomas McLeod	(14) NAME BEFORE MARRIAGE Letitia Lowder
(9) PRESENT POSTOFFICE OF FATHER Manning S C	(15) PRESENT POSTOFFICE OF MOTHER Manning S C
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40 (Years)	(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 37 (Years)
(12) BIRTHPLACE S C	(18) BIRTHPLACE S C
(13) OCCUPATION Farmer	(19) OCCUPATION Housewife
(20) Number of children born to mother, including present birth Five	(21) Number of children of this mother now living, including present birth Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) A E Broadway M D

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Manning S C

Given name added from a supplemental report

..... 19 ....
Registrar

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

(27) Filed Jan 28 1922 (28) A J White
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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