

WRITE PLAINLY WITH INK—THIS IS A PERMANENT RECORD.
 M. 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 3

(1) PLACE OF BIRTH

County of Richland

Township of

or
 Inc. Town of

or
 City of Columbia

(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

Registration District No. 28A

File No.—For State Registrar Only

5032

Registered No. 113
 (For use of Local Registrar)

(2) Full Name of Child Wade Fredrick Franklin

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

3. BOY OR GIRL Boy (4) Twin or Triplet To be answered only in case of Twin or Triplet (5) Number in order of birth (6) Age Parents Married yes (7) DATE OF BIRTH Feb 22 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wade Fredrick Franklin

(9) PRESENT POSTOFFICE OF FATHER Columbia S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30
 (Year)

(12) BIRTHPLACE Trenton, S.C.

(13) OCCUPATION R.R. Flagman

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

MOTHER.

(14) NAME BEFORE MARRIAGE Louis Lewis

(15) PRESENT POSTOFFICE OF MOTHER Columbia S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27
 (Year)

(18) BIRTHPLACE Greenville, S.C.

(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 at 11 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. C. DeBorja Jr.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

M. B. Woodward, M.D.

11/19/20 19 20
 Registrar

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

(27) Filed Feb 27 1923 (28) Chas. Shear 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.