

## (1) PLACE OF BIRTH

County of Aiken  
 Township of Langley  
 OR  
 Inc. Town of .....  
 OR  
 City of Gloverville

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

6325

Registration District No. V.1.7A Registered No. V.7  
 (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 Robt Ezra McDaniel (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? yes (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH March 30, 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Golie McDaniel  
 (9) PRESENT POSTOFFICE OF FATHER Langley S.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (Years)  
 (12) BIRTHPLACE Aiken Co S.C.

(13) OCCUPATION Auto Repair

(20) Number of children born to mother, including present birth 3

## MOTHER.

(14) NAME BEFORE MARRIAGE Carl Plunket  
 (15) PRESENT POSTOFFICE OF MOTHER Langley S.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)  
 (18) BIRTHPLACE Aiken Co S.C.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) W. D. Wright(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Langley S.C.

Given name added from a supplemental report

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

(27) Filed April 1, 1922 (28) L. W. Spradley 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.