

IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1. THIS OFFICIAL, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of York
Township of Bull Creek
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

2755

Registration District No. 4403 Registered No. 2
(For use of Local Registrar)

(2) Full Name of Child Robert Shillinglaw (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 22 1922
(If required, set forth in full in English) (Name of Month) (Day) (Year)

FATHER

(8) FULL NAME John Alexander Shillinglaw

(9) PRESENT POSTOFFICE OF FATHER Sharon SC R#1

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 57 (Years)

(12) BIRTHPLACE York Co SC

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 7

MOTHER

(14) NAME BEFORE MARRIAGE Cornie Theresa Hord

(15) PRESENT POSTOFFICE OF MOTHER Sharon SC R#1

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 41 (Years)

(18) BIRTHPLACE York Co SC

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Charles O. Burruss

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

Given name added from a supplemental report

L. H. Harty 191...
Feb. 3 1922
Registrar

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

(27) Filed Feb. 3, 1922 (28) W. A. Mitchell 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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