

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.

(1) PLACE OF BIRTH

County of Aiken
Township of McClellan
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
6281

Registration District No. 208 Registered No. 6
(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 Elvora Ene Clary If child is not yet named, make supplemental report as directed

(3) ~~Boy~~ GIRL? (4) Twin or Triplet? (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 22
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Henry Ene Clary
(9) PRESENT POSTOFFICE OF FATHER Earle SC
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY (Years)
(12) BIRTHPLACE Aiken Co
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 2

MOTHER.
(14) NAME BEFORE MARRIAGE Lizzie Bonknight
(15) PRESENT POSTOFFICE OF MOTHER Earle SC
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY (Years)
(18) BIRTHPLACE Aiken Co
(19) OCCUPATION Housewife
(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 at
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jane Carroll
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Earle SC

Given name added from a supplemental report

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

(27) Filed Jan 22 19 32 (28) J. C. [Signature] 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.