

WHITE CLARITY, WHEN BREASTING INK—THIS IS A PRELIMINARY BOARD.
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.

McCAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Aiken
Township of Hammond
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
20699

Registration District No. 2050

Registered No. 22
(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 Dorsey Taylor

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH June 23 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

J. D. Taylor

(9) PRESENT POSTOFFICE OF FATHER

Clear Water SC

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY 34
(Years)

(12) BIRTHPLACE

Aiken SC

(13) OCCUPATION

Mill Op

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

8

MOTHER.

(14) NAME BEFORE MARRIAGE

Kate Waldner

(15) PRESENT POSTOFFICE OF MOTHER

Clear Water SC

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY 29
(Years)

(18) BIRTHPLACE

Augusta Ga

(19) OCCUPATION

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

(23) (Signature)

(24) State whether Physician or Midwife

J. D. Taylor

(25) Address of Physician or Midwife

Bath SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed

June 26 1922 (28) J. D. Taylor 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.