

MARGIN RESERVED FOR BINDING.

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.

McGraw-Hill Book Co., Columbia, S. C.

Form No. 1

(1) PLACE OF BIRTH

County of Saluda
Township of No 6
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
20054

Registration District No. 3905 Registered No. H. 2
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Earnest James Cockrell

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 1 (6) Are Parents Married? yes (7) DATE OF BIRTH May 30 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Earnest Cockrell
(9) PRESENT POSTOFFICE OF FATHER Saluda, S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28
(12) BIRTHPLACE Saluda
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Florence Goodman
(15) PRESENT POSTOFFICE OF MOTHER Saluda, S.C.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 29
(18) BIRTHPLACE Saluda
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Lilla Harris

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Saluda, 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 July 10 19 22 (28) S. W. Koon 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.