

STANDARD FORM NO. 1-10-1916  
WHEN 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 8.

(1) PLACE OF BIRTH

County of Union

Township of Union

or  
Inc. Town of N. M. H.

or  
City of Union

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

# CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

44852

Registration District No. 42-A Registered No. 149

(For use of Local Registrar)

St.; 2 Ward

(2) Full Name of Child Jno. Melvin Rhodes If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? X

(4) Twin or Triplet? X

(5) Number in order of birth X

(6) Are Parents Married? yes

(7) DATE OF BIRTH Dec 2 1910

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Levi Rhodes

(9) PRESENT POSTOFFICE OF FATHER Union S.C.

(10) COLOR OR RACE white

(11) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE Lancaster Co S.C.

(13) OCCUPATION mill work

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

## MOTHER.

(14) NAME BEFORE MARRIAGE Litha Sanders

(15) PRESENT POSTOFFICE OF MOTHER Union S.C.

(16) COLOR OR RACE white

(17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Union Co S.C.

(19) OCCUPATION Domestic

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

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive 10 P. M., (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) W. H. Hoke

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Union 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 Jan 10 1916 (28) J. G. Sarratt 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.

REGISTRAR  
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W. H. McCaw, of Columbia