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(1) PLACE OF BIRTH Ashville **CERTIFICATE OF BIRTH**
 County of Wayne **STATE OF SOUTH CAROLINA.**
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only
71057

Township of Anderson Hill
 Inc. or Town of Registration District No. 111 Registered No. 7 51
 (For use of Local Registrar)
 City of (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. Gessie Venable Yarborough If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? (5) Number in order of birth (6) Age at Birth yes (7) DATE OF BIRTH Aug 1 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Marion Yarborough
 (9) PRESENT POSTOFFICE OF FATHER Truy & C
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 51 (Years)
 (12) BIRTHPLACE Tenn Ga
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 3

MOTHER.
 (14) NAME BEFORE MARRIAGE Lillie Tuggle
 (15) PRESENT POSTOFFICE OF MOTHER Truy & C
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 26 (Years)
 (18) BIRTHPLACE Ga
 (19) OCCUPATION House Wife
 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at ... 1:25 ... P. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. H. X. Workman, M.D.
 (24) State whether Physician or Midwife | (25) Address of Physician or Midwife

Given name added from a supplemental report
 _____, 191....
 _____ Registrar

(26) Witness W. K. Long
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filled Aug. 3, 1916 (28) Samm L. Long 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.

MAIN RESERVED FOR BIDDING
 WILL BE WITH UPDATING THE IN A PERMANENT RECORD
 IN CASE OF TWINS OR TRIPLETS IN A SEPARATE MEANS FOR EACH CHILD, AND MARK THE
 FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.
 McCay of Columbia