

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.

Caw. of Columbia.

CERTIFICATE OF BIRTH

(1) PLACE OF BIRTH
 County of Spartanburg
 Township of Cherokee
 or
 Inc. Town of Registration District No. 400.70
 or
 City of (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only
47405

(2) Full Name of Child Volney Jerry Martin Jr 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 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 13 1916
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Volney Jerry Martin
 (9) PRESENT POSTOFFICE OF FATHER Chesnee S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)
 (12) BIRTHPLACE Spartanburg
 (13) OCCUPATION mill work
 (20) Number of children born to mother, including present birth Two

MOTHER.
 (14) NAME BEFORE MARRIAGE Emma Painter
 (15) PRESENT POSTOFFICE OF MOTHER Chesnee S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 19 (Years)
 (18) BIRTHPLACE Spartanburg Co
 (19) OCCUPATION Housekeeping
 (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 at Chesnee on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. E. Martin

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

101-8143 1916

L. A. Riser, M.D.
 Registrar

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

(27) Filed Jan 15 1916 (28) 3 Blockhouse
 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.

M.G.