

## (1) PLACE OF BIRTH

County of horry

Township of .....

or  
Inc. Town of Chas.or  
City of Chas.

(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

71745

Registration District No. 9A Registered No. 872

(For use of Local Registrar)

(2) Full Name of Child Raymond Howard Smith 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 Aug 10, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Jos Howell Smith(9) PRESENT POSTOFFICE OF FATHER Peto(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 36 (Years)(12) BIRTHPLACE Chas. S.C.(13) OCCUPATION machinery-helper(20) Number of children born to mother, including present birth 6

## MOTHER.

(14) NAME BEFORE MARRIAGE Bessie Kinnick(15) PRESENT POSTOFFICE OF MOTHER Peto(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 32 (Years)(18) BIRTHPLACE Chas. S.C.(19) OCCUPATION house work(21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.(23) (Signature) Mrs. M. K. Kinnick(24) State whether Physician or Midwife (25) Address of Physician or Midwife  
M. K. Kinnick 87 Chas. St.

Given name added from a supplemental report

191...

Registrar

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

(27) Filed SPB 1916 (28) 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.

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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.

McCaw, of Columbia.