

(1) PLACE OF BIRTH,
County of Union
Township of

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

Filing No.—For State Registrar Only
66485

Inc. Town of Registration District No. 4203 Registered No. 91
(For use of Local Registrar)
City of Union (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 Wildesten If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>—</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 6</u> (Name of Month) (Day) (Year)
(8) FULL NAME <u>Noah Crawford</u>			(14) NAME BEFORE MARRIAGE <u>Wildesten</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Union S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Union S.C.</u>	
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>21</u> (Years)		(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>20</u> (Years)
(12) BIRTHPLACE <u>Burroughs N.C.</u>			(18) BIRTHPLACE <u>Burroughs N.C.</u>	
(13) OCCUPATION <u>Med. Operator</u>			(19) OCCUPATION <u>Domestic</u>	
20. Number of children born to mother, including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 7:30 P.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) D. H. Wildesten

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Union S.C.

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

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed June 8 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.

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.

COLUMBIA I. S. D.
STATE HEALTH OFFICER
BEN F. WYMAN, M.D.