

(1) PLACE OF BIRTH
 County of Spartanburg
 Township of French Springs
 or
 Inc. Town of Incapon
 or
 City of Incapon (No. St.; Ward)
 (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

66198

Registration District No. 40009 Registered No. 89
 (For use of Local Registrar)(2) Full Name of Child Ray Rogers Callister If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 23 1916
 (Name of Month) (Day) (Year)

FATHER: (8) FULL NAME Earl M Callister (9) PRESENT POSTOFFICE OF FATHER Incapon (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 22 (Years) (12) BIRTHPLACE SC (13) OCCUPATION Cotton Mill work

MOTHER: (14) NAME BEFORE MARRIAGE Minnie Pruitt (15) PRESENT POSTOFFICE OF MOTHER Incapon (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years) (18) BIRTHPLACE SC (19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 3 (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 alive at 9 9 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) S. J. Moore(24) State whether Physician or Midwife (25) Address of Physician or Midwife Sumter

Given name added from a supplemental report

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Registrar

(26) Witness
 (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed 6/24/16 1916 (28) S. J. Moore 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.

N. H.—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.