

(1) PLACE OF BIRTH

County of MonroeTownship of Kingor
Inc. Town ofor
City of

(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

64121

Registration District No. 1702 Registered No. 5-6
(For use of Local Registrar)(2) Full Name of Child Mary Stillman { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH June 23 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert Orphy(9) PRESENT POSTOFFICE OF FATHER St. Louis(10) COLOR OR RACE B (11) AGE AT LAST BIRTHDAY 22 (Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Ma Stillman(15) PRESENT POSTOFFICE OF MOTHER St. Louis(16) COLOR OR RACE B (17) AGE AT LAST BIRTHDAY 21 (Years)(18) BIRTHPLACE S.C.(19) OCCUPATION Farmer Hand(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 400 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Dr. J. B. Johnston

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

Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed July 1, 1916 (28) C. D. Johnson 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.

MAKING REPRODUCED THE BIRTHING. 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.

MADE BY, of Columbia.