

MAINTAIN REGISTERED FOR BIRTHING.
WHITE 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.

(1) PLACE OF BIRTH

County of Union
Township of Union
or
Inc. Town of Union
or
City of Union
(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
44856

Registration District No. 42-A Registered No. 142
(For use of Local Registrar)
Sl. 1 Ward 1
(No. Oshield)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child James Kenneth

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 12 4 1915
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME J. B. Renwick
(9) PRESENT POSTOFFICE OF FATHER Union
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 38 (Years)
(12) BIRTHPLACE Newberry Co
(13) OCCUPATION Laborer
(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Lillie Phusew
(15) PRESENT POSTOFFICE OF MOTHER Union SC
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 36 (Years)
(18) BIRTHPLACE Union Co
(19) OCCUPATION Ward
(21) Number of children of this mother now living, including present birth Six

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was blue at 6 15 P. M.,
(Born live or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) Wm J Sanders
(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Wm J Sanders Oshield St

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

(26) Witness Wm J Sanders
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Dec 20 1915 (28) A G Sarratt 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

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McCaw