

MARGIN RESERVED FOR BINDING.

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.

(1) PLACE OF BIRTH  
 County of Christiefield  
 Township of Chiraw  
 or  
 Inc. Town of.....  
 or  
 City of..... (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  
**76340**

Registration District No. 1201 Registered No. 88  
 (For use of Local Registrar)

(2) Full Name of Child Willie Hancock If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept-10-16  
 (Name of Month) (Day) (Year)

**FATHER**  
 (8) FULL NAME Leggett Hancock  
 (9) PRESENT POSTOFFICE OF FATHER Chiraw SC  
 (10) COLOR OR RACE Blk (11) AGE AT LAST BIRTHDAY 22  
 (Years)  
 (12) BIRTHPLACE Christiefield Co  
 (13) OCCUPATION Farming  
 (20) Number of children born to mother, including present birth 1

**MOTHER**  
 (14) NAME BEFORE MARRIAGE Lola Marsh  
 (15) PRESENT POSTOFFICE OF MOTHER Chiraw SC  
 (16) COLOR OR RACE Blk (17) AGE AT LAST BIRTHDAY 20  
 (Years)  
 (18) BIRTHPLACE SC  
 (19) OCCUPATION Farm laborer  
 (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 10 P.M.,  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dollie Hancock  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Chiraw SC

Given name added from a supplemental report  
 .....  
 ..... 19 ..  
 Registrar

(26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed Sept-15-16 (28) P. B. Ingram 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.