(1) PLACE OF BIRTH

County of Greenville

Township of Fairview

or

Inc. Town of .....

or

City of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
90072

Registration District No. 2206 Registered No. 140
(For use of Local Registrar)

(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 Roy Rodgers (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Boy

(4) Twin or Triplet? (5) Number in order of birth
To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes

(7) DATE OF BIRTH Dec 1, 1916 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME	Sam Rodgers	(14) NAME BEFORE MARRIAGE	Sarah Pinkney
(9) PRESENT POSTOFFICE OF FATHER	Simpsonville	(15) PRESENT POSTOFFICE OF MOTHER	Simpsonville
(10) COLOR OR RACE	Black (11) AGE AT LAST BIRTHDAY 21 (Years)	(16) COLOR OR RACE	Black (17) AGE AT LAST BIRTHDAY 20 (Years)
(12) BIRTHPLACE	S.C.	(18) BIRTHPLACE	S.C.
(13) OCCUPATION	Farmer	(19) OCCUPATION	Housekeeper
(20) Number of children born to mother, including present birth	1	(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 5 a.m., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) S. L. Richardson

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

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 Jan 10 1917 (28) T. B. Duckett
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.

McCAW OF COLUMBIA, COLUMBIA, S. C.

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.