

## (1) PLACE OF BIRTH

County of FairfieldTownship of 7OR  
Inc. Town of .....OR  
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

52082

Registration District No. 1907 Registered No. 6

(For use of Local Registrar)

(2) Full Name of Child Mansel Elwood Rainer 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 (6) Are Parents Married yes (7) DATE OF BIRTH February 18 1916

To be answered only in event of Twins or Triplets

(Name of Month) (Day) (Year)

## FATHER.

## MOTHER.

(8) FULL NAME George U. Rainer(14) NAME BEFORE MARRIAGE Lotta Rainer(9) PRESENT POSTOFFICE OF FATHER Ridgeway, S.C.(15) PRESENT POSTOFFICE OF MOTHER Ridgeway, S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY (Years)(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY (Years)(12) BIRTHPLACE Fairfield Co.(18) BIRTHPLACE Fairfield Co.(13) OCCUPATION Farmer(19) OCCUPATION House wife

(20) Number of children born to mother, including present birth

(21) Number of children of this mother now living, including present birth

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) .....

(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 Mar. 20, 1916 (28) J. C. Chappell 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.