

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.

City of Columbia
 S. C.

(1) PLACE OF BIRTH

County of YorkTownship of Cane Creek

Inc. Town of

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

47737

Registration District No. 4409 Registered No. 2

(For use of Local Registrar)

(2) Full Name of Child Wheeler, William James } 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 Jan. 2

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wheeler, James(9) PRESENT POSTOFFICE OF FATHER Cane Creek S. C.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 30

(Years)

(12) BIRTHPLACE Cherokee Co. S. C.(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 1

MOTHER.

(15) NAME BEFORE MARRIAGE Martha East(16) PRESENT POSTOFFICE OF MOTHER Cane Creek S. C.(17) COLOR OR RACE White(18) AGE AT LAST BIRTHDAY 34

(Years)

(19) BIRTHPLACE Cherokee Co. S. C.(20) OCCUPATION Housekeeping(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 born alive at 10 4 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. J. East

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

Given name added from a supplemental report

191

Registrar

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan. 21, 1912.(28) W. J. East 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.

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