

16 092878

FILE No.—For State Registrar Only

00129

Standard Certificate of Birth

STATE OF SOUTH CAROLINA

1. PLACE OF BIRTH

County of AikenTownship of Silvertonor
Inc. Town of Ellentownor
City of St.Registration District No. 210 Registered No. St.
(For use of Local Registrar) (Ward)

2. FULL NAME OF CHILD

3. Boy or Girl boy If Plural births

4. Twin, triplet or other

5. Number, in order of birth

6. Premature

7. Are Parents Married? yes8. Date of birth June 21, 1916
(Month, day, year)9. Full name Charlie Council FATHER10. Residence (mailing address) Ellentown St.11. Color or race col12. Age at child's birth 28 (years)13. Birthplace (city or place) Aiken St.
(State or country)14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. yard man

15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.

16. Date (month and year) last engaged in this work

17. Total time (years) spent in this work 10y

18. Name before marriage

19. Residence (mailing address) Ellentown St.
(If non-resident, give place and State)20. Color or race col21. Age at child's birth 28 (years)22. Birthplace (city or place) Aiken St.
(State or country)23. Trade, profession, or particular kind of work done, as house-keeper, typist, nurse, clerk, etc. farm hand24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc. & housewife

25. Date (month and year) last engaged in this work

26. Total time (years) spent in this work 10y27. Number of children of this mother (At time of birth and including this child) (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 028. If stillborn, period of gestation months weeks

29. Cause of stillbirth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify to the birth of this child, who was alive at 4:00 m. on the date above stated.
(Born alive or stillborn)

{ When there was no attending physician or midwife, then the father, householder, etc., should make this return.

Given name added from a supplementary report (Date of)

Registrar.

(Signed) Lizzie Council Parentor GuardianAddress Woodward, W. D.Filed Feb. 6, 1913 U. B. Woodward, M. D. Registrar.MARGIN RESERVED FOR BINDING
WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
each, in order of birth, stated.
(See instructions on Back of Certificate.)
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of