

Form No. 1.

(1) PLACE OF BIRTH
County of York
Township of No. 2
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
46129

(2) Full Name of Child Anderson Cameron } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 18, 1916
Is to be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Anderson Cameron
(9) PRESENT POSTOFFICE OF FATHER Woodward S.O.
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30 (Years)
(12) BIRTHPLACE Fairfield, S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Rizzie Boulware
(15) PRESENT POSTOFFICE OF MOTHER Woodward S.C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 24 (Years)
(18) BIRTHPLACE Fairfield, S.C.
(19) OCCUPATION Farmer
(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) Caroline J. ... (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Woodward, S.C.

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 18 1916 (28) W. A. Blaine Local Registrar

MARGIN RESERVED FOR BINDING.
SAFE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
of Columbia

*Where there was no attending physician or midwife, then the father, householder, etc., should make this return. If there even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.