

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Spartanburg  
Township of Beach Springs  
or  
Inc. Town of  
or  
City of Arlington S.C.

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

File No.—For State Registrar Only  
91774

Registration District No. 4000a Registered No. 158  
(For use of Local Registrar)

(2) Full Name of Child Gladys Neesantine Blackwell (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <input checked="" type="checkbox"/>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec 29th 1916</u> (Name of Month) (Day) (Year)
FATHER.		MOTHER.		
(8) FULL NAME <u>Osberry Blackwell</u>	(14) NAME BEFORE MARRIAGE <u>Authy Walker</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Arlington, S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Arlington, S.C.</u>			
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>64</u> (Years)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>36</u> (Years)	
(12) BIRTHPLACE <u>S.C.</u>	(18) BIRTHPLACE <u>N.C.</u>			
(13) OCCUPATION <u>Farming</u>	(19) OCCUPATION <u>Domestic</u>			
(20) Number of children born to mother, including present birth <u>5</u>	(21) Number of children of this mother now living, including present birth <u>2</u>			

CERTIFICATE OF ATTENDING PHYSICIAN, OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4:10 P.M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)  
(23) (Signature) O.C. Bennett, M.D., Greenville, S.C.  
(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 Dec 30 1916 (28) J.C. Moore Local Registrar

\*When there was no attending physician or midwife, then the father, household, 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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