

FORM NO. 3.

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

1 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.

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(1) PLACE OF BIRTH
 County of Pickens
 Township of Pickens
 OF
 Inc. Town of
 OR
 City of

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

File No.—For State Registrar Only
47184

Registration District No. 37.06 Registered No. 13
 (For use of Local Registrar)
 (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Richard L. Rayton Oliver } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u> <small>To be answered only in case of Twins or Triplets</small>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan. 29, 1916</u> <small>(Name of Month) (Day) (Year)</small>
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FATHER.

(8) FULL NAME R. L. Oliver

(9) PRESENT POSTOFFICE OF FATHER Pickens, S. C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 28 (Years)

(12) BIRTHPLACE Pickens Co.

(13) OCCUPATION Wheaver in Cotton Mill

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Nora Chapman

(15) PRESENT POSTOFFICE OF MOTHER Pickens S. C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Pickens Co.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 2 15 3 M., on the date above stated. (Born alive or stillborn) Hour A. M. or P. M.)

(23) (Signature) J. W. Bailey, M.D., Pickens, 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 Feb. 4, 1916 (28) By S. Johnson 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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