

(1) PLACE OF BIRTH

County of Anderson

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

48015

Township of

OR
Inc. Town of Hanea PathOR
City ofRegistration District No. 307 Registered No. 26

(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Ellen Lee Evelyn Fisher } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>—</u>	(5) Number in order of birth <u>1st</u>	(6) Are Parents Married? <u>Y</u>	(7) DATE OF BIRTH <u>Feb. 13, 1916</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Craglan Fisher(9) PRESENT POSTOFFICE OF FATHER Hanea Path S.C.(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 21 (Years)(12) BIRTHPLACE Anderson Co.(13) OCCUPATION Cattar Mill operator(20) Number of children born to mother, including present birth one

MOTHER.

(14) NAME BEFORE MARRIAGE Carrie Miller(15) PRESENT POSTOFFICE OF MOTHER Hanea Path(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 17 (Years)(18) BIRTHPLACE Go(19) OCCUPATION House Keeper(21) Number of children of this mother now living, including present birth one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was B. alive at 5 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) G. A. Williams

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

Physician Hanea Path S.C.

Given name added from a supplemental report

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

(27) Filed Feb. 24, 1916 (28) G. A. Williams 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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MAKING RETURNED FOR BIRTHING. THIS IS A PERMANENT RECORD. WRITE PLAINLY. WITH EXPANDING INK—THIS IS A PERMANENT RECORD. M. H.—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 1.

McCauley, of Columbia