

MARGIN RESERVED FOR BINDING.

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

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. McCaw, of Columbia.

(1) PLACE OF BIRTH **Charleston** STATE OF SOUTH CAROLINA.
 County of **Charleston** Bureau of Vital Statistics
 Township of **11** State Board of Health
 or
 Inc. Town of **11** Registration District No. **9A** Registered No. **1057**
 or (For use of Local Registrar)
 City of **Charleston** (No. **St. Francis Xavier**) (St. **Lucretia**) (Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only
76059

(2) Full Name of Child **Schachter** If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? Yes	(7) DATE OF BIRTH Sept. 3rd 1916 (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME John Henry Schachter	(14) NAME BEFORE MARRIAGE Julia A. Kemertey			
(9) PRESENT POSTOFFICE OF FATHER Cit	(15) PRESENT POSTOFFICE OF MOTHER Cit			
(10) COLOR OR RACE White	(11) AGE AT LAST BIRTHDAY 43 (Years)	(16) COLOR OR RACE White	(17) AGE AT LAST BIRTHDAY 30 (Years)	
(12) BIRTHPLACE Cit		(18) BIRTHPLACE Cit		
(13) OCCUPATION Machinist		(19) OCCUPATION		
(20) Number of children born to mother, including present birth 2		(21) Number of children of this mother now living, including present birth 2		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was **alive** at **4 A.** M., on the date above stated. (Born **alive** or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) **Langston Mitchell, M.D.**
 (24) State whether Physician or Midwife **Physician** (25) Address of Physician or Midwife **401 Meeting St.**

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 **10/9/16** (28) **J. Morris G...**
 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.