

Form No. 1

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

50657

(1) PLACE OF BIRTH

County of UnionTownship of Princetonor
Inc. Town ofor
City of

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

Registration District No. 420Registered No. 6

(For use of Local Registrar)

St.: Ward)

(2) Full Name of Child

Mary A. Ester Smith

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? no(7) DATE OF BIRTH Dec 11 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Cal. Smith(9) PRESENT POSTOFFICE OF FATHER mt Jabor(10) COLOR OR RACE color(11) BIRTHDAY 42
(Years)(12) BIRTHPLACE Union Co(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Smith(15) PRESENT POSTOFFICE OF MOTHER mt Jabor(16) COLOR OR RACE color(17) AGE AT LAST BIRTHDAY 39
(Years)(18) BIRTHPLACE Union(19) OCCUPATION Farmer(20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at Union Co on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Mary A. Ester Smith(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife mt Jabor

Given name added from a supplemental report

....., 191.....

..... Registrar

(26) Witness (Signature of Witness necessary only when question 25 is signed by mark)

(27) Filed Dec 24 1916 (28) D. G. Gallman 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.

MARGIN RESERVED FOR BINDING.

WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. 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 5.

McCaw, of Columbia.