

MARGIN RESERVED FOR BINDING.

WHITE 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.

City of Columbia

(1) PLACE OF BIRTH

County of Dorchester
Township of Dorchester
or
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
51984

Registration District No. 1705 Registered No. 15
(For use of Local Registrar)

(2) Full Name of Child Not Named

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

(3) BOY OR GIRL? Boy (4) Twin or triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH March 29, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Thomas Anderson

(9) PRESENT POSTOFFICE OF FATHER Summersville, Ark.

(10) COLOR OR RACE Cal (11) AGE AT LAST BIRTHDAY 51 (Years)

(12) BIRTHPLACE Sladerville, Dorchester Co.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Earlina Sellers

(15) PRESENT POSTOFFICE OF MOTHER Summersville, Ark.

(16) COLOR OR RACE Cal (17) AGE AT LAST BIRTHDAY 18 (Years)

(18) BIRTHPLACE Sladerville, Dorchester Co.

(19) OCCUPATION Housewife

(21) 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 alive at 6:30 a.m. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

Report made by the father (23) State whether Physician or Midwife Midwife (24) Address of Physician or Midwife Summersville, Ark.

Given name added from a supplemental report

Sept 10, 1916
Registars

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

(27) Filed March 31, 1916 (28) 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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