

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.

RECAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Mailboro  
 Township of Bennettsville  
 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

78238

Registration District No. 3301

Registered No. 169  
 (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 Charles E. Ervin

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 Aug 29, 1916  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.  
 (8) FULL NAME Pat Ervin  
 (9) PRESENT POSTOFFICE OF FATHER Bennettsville SC  
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 18 (Years)  
 (12) BIRTHPLACE Mailboro Co SC  
 (13) OCCUPATION Livery Stable Hand  
 (20) Number of children born to mother, including present birth One

MOTHER.  
 (14) NAME BEFORE MARRIAGE Anna Mack  
 (15) PRESENT POSTOFFICE OF MOTHER Bennettsville SC  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 18 (Years)  
 (18) BIRTHPLACE Mailboro Co SC  
 (19) OCCUPATION Housewife  
 (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 alive at 1 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Judith Gillespie

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Bennettsville SC

Given name added from a supplemental report

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

(27) Filed Sept 11, 1916 (28) W. C. Pale 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.