

ALREADY RECEIVED FOR FILING.
 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.

Clav. of Columbia

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

48031

Registration District No.

Registered No.

(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

No

(5) Number of order of birth

To be answered only in event of Twins or Triplets

(6) Are Parent Married?

Yes

(7) DATE OF BIRTH

Jan 22 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

George Frazier

(9) PRESENT POSTOFFICE OF FATHER

Sandy Springs

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

3/4 (Years)

(12) BIRTHPLACE

Anderson County

(13) OCCUPATION

Farmer

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

2

(14) NAME BEFORE MARRIAGE

Lefka Jinkins

(15) PRESENT POSTOFFICE OF MOTHER

Sandy Springs

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

3/4 (Years)

(18) BIRTHPLACE

Anderson County

(19) OCCUPATION

Farm Laborer

(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 10 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Susanne Brown

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife Sandy Springs

Given name added from a supplemental report

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Registrar

(26) Witness

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

(27) Filed Jan 23 1916

(28) H. W. Hinton, Registrar

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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