

(1) PLACE OF BIRTH

County of ChathamTownship of St. PhilipsInc. Town of St. PhilipsCity of St. Philips

(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

Registration District No. 9-13

No. for this Register

38127

Registered No. 247

(For use of Local Registrar)

(2) Full Name of Child Mary Anna Klein

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

(3) SEX OF CHILD

(4) Twin or Triplet

(5) Number in order of birth

(6) Age of child

(7) DATE OF BIRTH

(8) (Name of Month) (Day) (Year)

FATHER

(9) FULL NAME

Edward Klein

(10) PRESENT RESIDENCE OF FATHER

St. Philips SC

(11) COLOR OR RACE

White

(12) AGE AT LAST BIRTHDAY

36

(13) BIRTHPLACE

Germany

(14) OCCUPATION

Carpenter

MOTHER

(15) NAME BEFORE MARRIAGE

Elena Booker

(16) PRESENT RESIDENCE OF MOTHER

St. Philips SC

(17) COLOR OR RACE

White

(18) AGE AT LAST BIRTHDAY

33

(19) BIRTHPLACE

So. Car.

(20) OCCUPATION

Domestic

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

9

(22) Number of children of this mother now living, including present birth

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was Alive on the date above stated.

(24) (Date of Birth) (Hour A. M. or P. M.)

(25) (Signature)

(26) State whether Physician or Midwife

Dr. J. H. Thompson

(27) Address of Physician or Midwife

St. Philips S.C.

Given name added from a supplemental report

(28) Witness

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

(29) Filed

Nov. 12, 1912

(30)

Chas. W. Wain

When there was no attending physician or midwife, then the father, householder, etc., should report the birth of the child. If a child breathes even once, it must not be reported as stillborn. No report is required before the first month of pregnancy.