

PAPERING 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.
 McGraw, of Columbia.

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health

(1) PLACE OF BIRTH
 County of Cherokee
 Township of Cherokee
 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.)

File No. 89122 For State Registrar Only
 Registration District No. 1206 Registered No. 125
 (For use of Local Registrar)

(2) Full Name of Child Smiley Gardner { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>GIRL</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <small>To be answered only in case of Twins or Triplets</small>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Nov 4 1916</u> <small>(Name of Month) (Day) (Year)</small>
FATHER.		MOTHER.		
(8) FULL NAME <u>L. V. Rushin</u>		(14) NAME BEFORE MARRIAGE <u>Jordan</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Pageland SC</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>Pageland SC</u>		
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>39</u> <small>(Years)</small>	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>40</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>Cherokee Co.</u>		(18) BIRTHPLACE <u>Cherokee Co.</u>		
(13) OCCUPATION <u>Farmer</u>		(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>6</u>		(21) Number of children of this mother now living, including present birth <u>5</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was A. Lee at 5 P.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. Lee

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Pageland SC

(26) Witness L. V. Rushin
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 12-9-16 (28) T. E. Coak
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.