

McGraw-Hill, Inc. Columbia, N. Y. 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 2.

(1) PLACE OF BIRTH
County of Barnberg
Township of Thruvale
Inc. Town of _____
or _____
City of P.O. Glas
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
Registration District No. 404 Registered No. 56
(For use of Local Registrar)
St.; _____ Ward _____

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

File No.—For State Registrar Only
58674

(2) Full Name of Child Hallie Edward Ayer } 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 5 (6) Are Parents Married? yes (7) DATE OF BIRTH May, 2 1916
(Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Lee Ayer</u>	(14) NAME BEFORE MARRIAGE <u>Pearline Williams</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Glas, S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Glas, S.C.</u>
(10) COLOR OR RACE <u>white</u>	(11) AGE AT LAST BIRTHDAY <u>30</u> (Years)	(16) COLOR OR RACE <u>white</u>	(17) AGE AT LAST BIRTHDAY <u>25</u> (Years)
(12) BIRTHPLACE <u>Barnberg County</u>	(18) BIRTHPLACE <u>Barnwell Co</u>	(13) OCCUPATION <u>Farmer</u>	(19) OCCUPATION <u>St Home</u>
(20) Number of children born to mother, including present birth } <u>Five</u>	(21) Number of children of this mother now living, including present birth } <u>Five</u>		

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) H. Manning Brathorn
(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Physician Glas, S.C.

Given name added from a supplemental report _____ 191_____

Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) _____
(27) Filed 6/12 1916 (28) J. J. Herndon 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.