

(1) PLACE OF BIRTH

County of WashburnTownship of Kingor  
Inc. Town ofor  
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

66578

Registration District No. 4302 Registered No. 1-6

(For use of Local Registrar)

St.; ..... Ward)

(2) Full Name of Child Henry B. Kinder

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 June 30, 1916

## FATHER.

(8) FULL NAME Henry Kinder(9) PRESENT POSTOFFICE OF FATHER Kingston(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 70 (Years)(12) BIRTHPLACE Washburn(13) OCCUPATION farmer(20) Number of children born to mother, including present birth 8

## MOTHER.

(14) NAME BEFORE MARRIAGE Marie Fuller(15) PRESENT POSTOFFICE OF MOTHER Kingston(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 28 (Years)(18) BIRTHPLACE Washburn(19) OCCUPATION Housekeeper(21) Number of children of this mother now living, including present birth 1

## 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) Dr. H. H. Washington(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Kingston

Given name added from a supplemental report

(26) Witness Henry B. Kinder

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

(27) Filed July 6, 1916 (28) B. E. Clark 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.

fifth month of pregnancy.

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 1.

M. W. of Columbia