

## (1) PLACE OF BIRTH

County of Harry  
 Township of Buckles  
 or  
 Inc. Town of .....

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

File No.—For State Registrar Only

90389

 Registration District No. 2501 Registered No. 155106  
 (For use of Local Registrar)

 City of ..... (No. .... St.; ..... Ward)  
 (If birth occurs in a hospital or other institution give name of same instead of street and number.)

 (2) Full Name of Child Jessie B. Hyman If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>GIRL</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec. 6, 1916</u> (Name of Month) (Day) (Year)
FATHER.		MOTHER.		
(8) FULL NAME <u>J. L. Hyman</u>	(14) NAME BEFORE MARRIAGE <u>Mattie J. Todd</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Canway SC</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Canway SC</u>			
(10) COLOR OR RACE <u>white</u>	(11) AGE AT LAST BIRTHDAY <u>33</u> (Years)	(16) COLOR OR RACE <u>white</u>	(17) AGE AT LAST BIRTHDAY <u>37</u> (Years)	
(12) BIRTHPLACE <u>SC</u>		(18) BIRTHPLACE <u>SC</u>		
(13) OCCUPATION <u>Farming</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>6</u>		

## 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) Ann McFarland(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Canway SC

Given name added from a supplemental report

(26) Witness .....  
 (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Dec 12, 1916 (28) S. J. Bourne  
 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.