

MARGIN RESERVED FOR BINDING.
 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 5.

(1) PLACE OF BIRTH
 County of Georgetown
 Township of Sci
 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
85703

Registration District No. 2105 Registered No. 83
 (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 Mollie Hicks (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? girl (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Nov. 17, 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Edward Hicks
 (9) PRESENT POSTOFFICE OF FATHER Petersfield S.C.
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 36
 (Years)
 (12) BIRTHPLACE Georgetown Co. S.C.
 (13) OCCUPATION Day Laborer

MOTHER.

(14) NAME BEFORE MARRIAGE Eliza Skinner
 (15) PRESENT POSTOFFICE OF MOTHER Petersfield S.C.
 (16) COLOR OR RACE Neg. (17) AGE AT LAST BIRTHDAY 32
 (Years)
 (18) BIRTHPLACE Georgetown Co. S.C.
 (19) OCCUPATION Housewife

(20) Number of children born mother, including present birth 3 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born Alive at 7 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Countess Sumner
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Petersfield S.C.

Given name added from a supplemental report

(26) Witness E. R. McLean (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec. 3, 1916 (28) J. S. McCracken 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.

MCRAW OF COLUMBIA, COLUMBIA, S. C.