

Form No. 1

## (1) PLACE OF BIRTH

County of

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

City Board of Health

File No. — For State Registrar Only

57530

Township of

or

Inc. Town of

or

City of

Registration District No.

40813

Registered No.

134

(For use of Local Registrar)

(If birth occurs in a hospital or other institution give name of same instead of street and number.)

## (2) Full Name of Child

Carroll Steadman

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

(5) Number in order of birth

5

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Apr 28 1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Birch A Steadman

(14) NAME BEFORE MARRIAGE

Harriet Mahaffey

(9) PRESENT POSTOFFICE OF FATHER

Fingerwille

(15) PRESENT POSTOFFICE OF MOTHER

Fingerwille

(10) COLOR OF RACE

white

(11) AGE AT LAST BIRTHDAY

30

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

27

(12) BIRTHPLACE

Spartanburg Co

(18) BIRTHPLACE

Spartanburg Co

(13) OCCUPATION

Farmer

(19) OCCUPATION

Domestic

(20) Number of children born to mother, including present birth

15

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

4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at the date above stated.

(23) (Signature)

W. H. Steadman

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Carroll Steadman

Given name added from a supplemental report

191

Registrar

(26) Witness

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

(27) Date

May 7 1916

(28)

A. G. Burton

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.

MARGIN RESERVED FOR INDEXING.  
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.  
McGraw-Hill