

## (1) PLACE OF BIRTH

County of

Anderson

Township of

York

or  
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

58520

Registration District No.

305

Registered No.

41

(For use of Local Registrar)

## (2) Full Name of Child

Halter M. Swain Metz

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

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

—

(5) Number in order of birth

1

(To be answered only in case of twins or triplets)

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Apr

14

1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Halter Magnus Metz

(9) PRESENT POSTOFFICE OF FATHER

Lorowville SC

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

22

(Years)

(12) BIRTHPLACE

Newberry Co SC

(13) OCCUPATION

Farmer

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

{

1

{

## MOTHER.

(14) NAME BEFORE MARRIAGE

Alberta Bowie

(15) PRESENT POSTOFFICE OF MOTHER

Lorowville SC

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

20

(Years)

(18) BIRTHPLACE

Anderson Co SC

(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

born alive

at

7:30 A.M.

(Hour A.M. or P.M.)

on the date above stated.

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Physician

Lorowville SC

Given name added from a supplemental report

181

(26) Witness

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

(27) Filed May 16, 1916

(28) R. G. McElain

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.

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