

(1) PLACE OF BIRTH

County of ColletonTownship of Warren

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

45957

Registration District No. 1410 Registered No. 13

(For use of Local Registrar)

(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 Immi George { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Girl (4) Twin or triplet? No (5) Number in order of birth 3 (6) Are Parents Married? Yes (7) DATE BIRTH Jan. 1 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Peter George(9) PRESENT POSTOFFICE OF FATHER Smock & Co(10) COLOR Black (11) AGE AT LAST BIRTHDAY 39 (Years)(12) BIRTHPLACE Barnwell & Co(13) OCCUPATION hammer(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Esther Williams(15) PRESENT POSTOFFICE OF MOTHER Smock & Co(16) COLOR Black (17) AGE AT LAST BIRTHDAY 22 (Years)(18) BIRTHPLACE Colleton & Co(19) OCCUPATION hammer(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 alive at B. P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Immi George

(24) State whether Physician or Midwife. (25) Address of Physician or Midwife

Midwife Smock & Co

Given name added from a supplemental report

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

(27) Filed Jan 6 1916 (28) Louis C. Ragut 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.

NEARLY EXHAUSTED 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.