

MADE IN THE GOVERNMENT OF COLUMBIA, S. C. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Lancaster
 Township of Pleasant Hill
 or
 Inc. Town of
 or
 City of

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

File No.—For State Registrar Only
86295

Registration District No. 816 Registered No. 132
 (For use of Local Registrar)
 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 Dorothy Matilda

(3) ☒ BOY OR GIRL? (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Oct 23, 1916
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME B. P. Hammond
 (9) PRESENT POSTOFFICE OF FATHER Hammond S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 47
 (12) BIRTHPLACE Lancaster Co.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 18

MOTHER.

(14) NAME BEFORE MARRIAGE Elizabeth Wheeler
 (15) PRESENT POSTOFFICE OF MOTHER Hammond S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 35
 (18) BIRTHPLACE Lancaster Co.
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1 child

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was ... born ... at 1:30 P.M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) W. E. Williams M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed 12/11/16 (28) E. F. Williams 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.