

WHITE PLAINLY WITH INK—THIS IS A PREPARATION REQUIRED IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN. No 1 THIS OTHER, No 2, etc. in question 8

(1) PLACE OF BIRTH  
 County of Williamsburg  
 Township of Pine  
 or  
 Inc. Town of .....  
 or  
 City of ..... (No. .... St.; ..... Ward)  
 (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  
66623

Registration District No. 538 Registered No. 48  
 (For use of Local Registrar)

(2) Full Name of Child La. R. Rowell If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL boy (4) Twin or Triplet No (5) Number in order of birth 9 (6) Sex Male (7) DATE OF BIRTH June 4, 1916  
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Rowell  
 (9) PRESENT POSTOFFICE OF FATHER Bryan, S. C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32  
 (12) BIRTHPLACE Williamsburg co. S. C.  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 9

MOTHER.

(14) NAME BEFORE MARRIAGE Franky Rowell  
 (15) PRESENT POSTOFFICE OF MOTHER Bryan S. C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30  
 (18) BIRTHPLACE Williamsburg co. S. C.  
 (19) OCCUPATION House wife  
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was live at 9<sup>30</sup> A. M. on the date above stated. (Born alive or stillborn) Hour A. M. or P. M.)

(23) (Signature) Luvia Ann Hurst  
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Bryan, S. C.

Given name added from a supplemental report

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

(27) Filed June 12, 1916 (28) Albert R. Hordley 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.

McCOMB OF COLUMBIA, COLUMBIA, S. C.