

FORM NO. 5

MARGIN RESERVED 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.

McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Charleston

Township of

or Town of Charleston

City of Charleston

(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

75974

Registration District No. 9A Registered No. 953

(For use of Local Registrar)

(2) Full Name of Child Friedner { If child is not yet named, make supplemental report as directed

(3) ~~Boy or Girl?~~

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH 4th Sept 1916

(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Henry Meredith Friedner

(14) NAME BEFORE MARRIAGE Annie E Boland

(9) PRESENT POSTOFFICE OF FATHER Charleston S.C.

(15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.

(10) COLOR OR RACE W

(11) AGE AT LAST BIRTHDAY 29 (Years)

(16) COLOR OR RACE W

(17) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE Greenville S.C.

(18) BIRTHPLACE Newberry S.C.

(13) OCCUPATION Linotypist

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 6

(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 3:25 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dr. De Saussure

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

Given name added from a supplemental report

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

Amended P-1 SEP 25 1980 Registrar

(27) Filed 9/14 1916 (28) J. Mercier Green 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.