

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the McCaw. of Columbia FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 8.

(1) PLACE OF BIRTH

County of Greenville
Township of Butter
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
42982

Registration District No. 2202 Registered No. 104
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child May Hendrix Christoph
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 1
To be answered only in case of Twins or Triplets (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec. 4
(Name of Month) (Day) (Year)

FATHER
(8) FULL NAME Walter L. Christoph

(9) PRESENT POSTOFFICE OF FATHER Green S. C. Rt. #5-

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 44
(Years)

(12) BIRTHPLACE Spartanburg Co

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 12

MOTHER
(14) NAME BEFORE MARRIAGE Luanne Hendrix

(15) PRESENT POSTOFFICE OF MOTHER Green S. C. Rt. #5-

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 39
(Years)

(18) BIRTHPLACE Spartanburg Co

(19) OCCUPATION House Wife

(21) Number of children of this mother now living, including present birth 12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive as a child on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) R. F. McQueen, M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Green S. C. Rt. #5-

Given name added from a supplemental report

June 8, 1916
Greenville
Deputy Registrar

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

(27) Filed Jan 2, 1916 (28) J. C. Jones Local Registrar

*When there was no attending physician or midwife, then the father, mother, or other person who first discovered the 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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