

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

File No.—For State Registrar Only

71278

(1) PLACE OF BIRTH
 County of Musson

Township of

or
 Inc. Town of Hamlet

or
 City of

Registration District No. 207 Registered No. 99
 (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. Clarence Ed. Smalley { If child is not yet named, make supplemental report as directed

| | | | | |
|--------------------------------|-----------------------------------|---|--|---|
| (3) BOY OR GIRL? <u>Boy</u> | (4) Twin or Triplet? <u>No</u> | (5) Number in order of birth <u>1</u> <small>To be answered only in case of twins or triplets</small> | (6) Are Parents Married? <u>Yes</u> | (7) DATE OF BIRTH <u>Aug 2</u> 191 <u>6</u> <small>(Name of Month) (Day) (Year)</small> |
|--------------------------------|-----------------------------------|---|--|---|

FATHER.

MOTHER.

(8) FULL NAME Benton Smalley

(14) NAME BEFORE MARRIAGE Sadie M. Coy

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

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

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 37 (Years)

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 32 (Years)

(12) BIRTHPLACE Lantern Co

(18) BIRTHPLACE Lantern Co. S.C.

(13) OCCUPATION Merchant

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 8

(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 born at 8 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Hamlet S.C.

Given name added from a supplemental report

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

191....

(27) Filed Aug 2 1916 (28) L. G. Williams Local Registrar.

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.

WHEN FATHER OR MOTHER IS A FOREIGN-BORN CITIZEN, THIS IS A FOREIGN-BORN CITIZEN. IN SUCH CASES, THE REGISTRAR SHOULD USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE BLANK WITH THE WORDS "FOREIGN-BORN CITIZEN" IN THE UPPER LEFT CORNER. IN SUCH CASES, THE REGISTRAR SHOULD USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE BLANK WITH THE WORDS "FOREIGN-BORN CITIZEN" IN THE UPPER LEFT CORNER.