

WHITE PLAIN. WITH FADING 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 V. No. 1. THE OTHER, No. 2, etc., in question 3.  
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(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—for State Register Only	
County of	Florence	STATE OF SOUTH CAROLINA.		17878	
Township of	Little River	Bureau of Vital Statistics			
or		State Board of Health			
Inc. Town of		Registration District No.	2017	Registered No.	
or		(For use of Local Registrar)			
City of		(If birth occurs in a hospital or other institution, give name of same institution, street and number.)			
(2) Full Name of Child		Matthew Sidney Wiggins			
(3) BOY OR GIRL		(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
Boy		No	5	Yes	June 5, 1914
(8) FULL NAME		(9) PRESENT POSTOFFICE OF FATHER		(10) COLOR OR RACE	
Sidney Wylie Wiggins		Lake City		White	
(11) BIRTHPLACE		(12) OCCUPATION		(13) AGE AT LAST BIRTHDAY	
Florence Co		Farmer		46	
(14) NAME BEFORE MARRIAGE		(15) PRESENT POSTOFFICE OF MOTHER		(16) COLOR OR RACE	
Mable Buzzard		Lake City		White	
(17) BIRTHPLACE		(18) OCCUPATION		(19) AGE AT LAST BIRTHDAY	
Laurens Co		Housewife		48	
(20) Number of children born to mother, including present birth		(21) Number of children of this mother now living, including present birth			
5		5			
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was					
on the date above stated.					
(23) (Signature) J. H. Wiggins					
(24) State whether Physician or Midwife					
Physician					
(25) Address of Physician or Midwife					
Lake City, S.C.					
(26) Witness					
(Signature of Witness necessary only when question 23 is signed by mark)					
M. B. Woodard					
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.