

(1) PLACE OF BIRTH

County of ChesterTownship of Chester

Inc. Town of

City of

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

(2) Full Name of Child Mary Ann Ward

File No. — For State Registrar Only

61652

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 1102 Registered No. 63

(For use of Local Registrar)

(3) BOY Girl (4) Twin or Triplet? No (5) Number in order of birth 44 (6) Are Parents Married Yes (7) DATE OF BIRTH July 17, 1916
 (Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Wm. Anderson Ward(9) PRESENT POSTOFFICE OF FATHER Chester R. # 4(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 22 (Years)(12) BIRTHPLACE Fairfield Co.(13) OCCUPATION Farm laborer(20) Number of children born to mother, including present birth 3

MOTHER

(14) NAME BEFORE MARRIAGE Mary M. Wickens(15) PRESENT POSTOFFICE OF MOTHER Chester R. # 4(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 19 (Years)(18) BIRTHPLACE Fairfield Co.(19) OCCUPATION Housewife farm laborer(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 3 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) A. M. Wylie

(24) Whether Physician or Midwife (25) Address of Physician or Midwife

Physician Chester

Given name added from a supplemental report

(26) Witness

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

(27) Filed July 20 1916 (28) James H. Hume Local Registrar

Registrar I

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.