

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

54274

County of Robt

Township of Due West

Inc. Town of Due West

Registration District No. 116 Registered No. 22

City of \_\_\_\_\_ (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 Miss Ramsey Parkins If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
			<u>Yes</u>	<u>Mo 6 1916</u>
				(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME L G Parkins

(9) PRESENT POSTOFFICE OF FATHER Due West S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 47 (Years)

(12) BIRTHPLACE Texas

(13) OCCUPATION Miner

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Edna Rainey

(15) PRESENT POSTOFFICE OF MOTHER Due West S.C.

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

(18) BIRTHPLACE NC

(19) OCCUPATION House wife

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

(23) (Signature) J. C. Parkins  
(24) State whether Physician or Midwife M. D. (25) Address of Physician or Midwife Due West S.C.

Given name added from a supplemental report

..... 191.....

..... Registrar

(26) Witness \_\_\_\_\_ (Signature of Witness necessary only when question 23 is signed by marky)  
(27) Filed May 8 1916 (28) J. C. Kaitbl Jr. 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.

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REGISTERED IN THE OFFICE OF THE REGISTERAR, STATE OF SOUTH CAROLINA, AT \_\_\_\_\_, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 1916. McCaw