

WRITE PLAINLY, WITH UNFADING 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, No. 1. THE OTHER, No. 2, etc., in question 8.

McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Cherokee

Township of

or
Inc. Town ofor
City of Gaffney

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

76164

Registration District No. 10a Registered No. 129

(For use of Local Registrar)

City of Gaffney (No. 116 mile St.; Ward)(2) Full Name of Child. Sarah Jean Fontenberry { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

(4) Twin or Triplet? 1

To be answered only in event of twins or triplets

(5) Number in order of birth 1(6) Are Parents Married? Yes

(7) DATE OF BIRTH

Sept. 13 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Arthur Richard Fontenberry

(9) PRESENT POSTOFFICE OF FATHER

Gaffney S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

27 (Years)

(12) BIRTHPLACE

Cherokee Co., S.C.

(13) OCCUPATION

Machinist

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

{ 1

MOTHER.

(14) NAME BEFORE MARRIAGE

Fanny Belle Whitehead

(15) PRESENT POSTOFFICE OF MOTHER

Gaffney S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

22 (Years)

(18) BIRTHPLACE

Cherokee Co., S.C.

(19) OCCUPATION

Housewife

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

{ 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 10 14 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) [Signature] M. D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Gaffney S.C.

Given name added from a supplemental report

..... 191.....

Registrar

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

(27) Filed 9/15 1916 (28) [Signature] 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.