

(1) PLACE OF BIRTH

County of CalhounTownship of Oawcaw

OR

Inc. Town of

OR

City of

(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

63305

Registration District No. 801 Registered No. 54

(For use of Local Registrar)

(2) Full Name of Child Brade/Biggsman If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth 4 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 3, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Clarence Biggsman(9) PRESENT POSTOFFICE OF FATHER Thurston(10) COLOR OR RACE Wsgw (11) AGE AT LAST BIRTHDAY 26 (Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Farm hand(20) Number of children born to mother, including present birth Four

MOTHER.

(14) NAME BEFORE MARRIAGE Dora G. Lovel(15) PRESENT POSTOFFICE OF MOTHER St. Matthews(16) COLOR OR RACE Wsgw (17) AGE AT LAST BIRTHDAY 23 (Years)(18) BIRTHPLACE S.C.(19) OCCUPATION Farm hand(21) Number of children of this mother now living, including present birth Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was a live at 5:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. L. Cannon

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

Given name added from a supplemental report

W. L. Cannon 1916W. L. Cannon Registrar(26) Witness S. V. Murphy
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed June 16, 1916 (28) S. H. Murphy 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.

MARGIN RESERVED FOR BINDING.

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 5.

Mc-Caw, of Columbia.