

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town of

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

85869

Registration District No. 2212 Registered No. 158
(For use of Local Registrar)

(2) Full Name of Child

Georgia Ann

If child is not yet named, make supplemental report as directed

(3) BOY OR
GIRL

Girl

(4) Twin
or Triplet?(5) Number in
order of birth

To be answered only in case of Twins or Triplets

(6) Are
Parents
Married?

Yes

(7) DATE OF

BIRTH

Nov. 22, 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME

Andrew Meekins

(9) PRESENT
POSTOFFICE
OF FATHER

Florentine

(10) COLOR
OR
RACE

Negro

(11) AGE AT LAST
BIRTHDAY

21

(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Farm hand

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

1

MOTHER.

(14) NAME BEFORE
MARRIAGE

Lillian Leabb

(15) PRESENT
POSTOFFICE
OF MOTHER

Florentine

(16) COLOR
OR
RACE

Negro

(17) AGE AT LAST
BIRTHDAY

18

(Years)

(18) BIRTHPLACE

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 11:37 A.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

W. A. Ross

(24) State whether Physician or Midwife

Midwife

Given name added from a supplemen-
tal report

, 191...

Registrar

(26) Witness

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

(27) Filed

Nov. 1916

(28) W. A. Ross

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 RECORD.

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.

McCaw, of Columbia.