

Form No 1.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of

STATE OF SOUTH CAROLINA

Township of

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

66181

Inc. Town of

Registration District No.

Registered No. 101
(For use of Local Registrar)

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

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 2

(6) Are Parents Married? Yes

(7) DATE OF BIRTH June 8, 1916

(8) FULL NAME

L. J. Weststead

(9) PRESENT POSTOFFICE OF FATHER

El Paso Texas

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY 24 (Years)

(12) BIRTHPLACE

Tenn

(13) OCCUPATION

U.S. Army

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

3

(14) NAME BEFORE MARRIAGE

Glennie Hall

(15) PRESENT POSTOFFICE OF MOTHER

Irman, Ia

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY 22 (Years)

(18) BIRTHPLACE

Ill. C.

(19) OCCUPATION

Miss Operative Housekeeper and

(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 on the date above stated.

11 P. M. (Hour A. M. or P. M.)

(23) (Signature)

J. A. Gibson M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Irman, Ia

Given name added from a supplemental report

(26) Witness

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

(27) Filed

June 9, 1916

(28)

E. L. Cooper 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.

M. 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.

Law, of Columbia