

(1) PLACE OF BIRTH

County of

Township of

or  
Inc. Town ofor  
City of

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

(2) Full Name of Child

(3) BOY OR  
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?(7) DATE OF  
BIRTH June 7, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL  
NAME(9) PRESENT  
POSTOFFICE  
OF FATHER(10) COLOR  
OR  
RACE(11) AGE AT LAST  
BIRTHDAY 27  
(Years)

(12) BIRTHPLACE

(13) OCCUPATION

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

## MOTHER.

(14) NAME BEFORE  
MARRIAGE(15) PRESENT  
POSTOFFICE  
OF MOTHER(16) COLOR  
OR  
RACE(17) AGE AT LAST  
BIRTHDAY 25  
(Years)

(18) BIRTHPLACE

(19) OCCUPATION

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

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was 2:45 at 1:00 A.M.,  
(Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.(23) (Signature) H. H. H.(24) State whether Physician or Midwife (25) Address of Physician or Midwife  
H. H. H.Given name added from a supplemen-  
tal report(26) Witness  
(Signature of Witness necessary only  
when question 23 is signed by mark)(27) Filed July 15, 1916(28) S. M. McAdams  
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.a child breathes even once, it must not be reported as stillborn.  
fifth month of pregnancy.

RECEIVED BY THE REGISTRAR  
THIS CERTIFICATE IS TO BE FILED IN A SEPARATE BLANK FOR EACH CHILD, AND MARK THE  
FIRST-BOEN N. NO. 1. THIRD OFFICIAL, NO. 2, ETC., IN QUESTION 8.

CERTIFICATE OF BIRTH  
STATE OF SOUTH CAROLINA.  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only  
63006