

FORM NO. 1 MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.

WILL M. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the

M. B. McCaw, of Columbia. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Lexington

Township of Saluda

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

46775

Registration District No. 3111

Registered No. 2

(For use of Local Registrar)

(2) Full Name of Child Heyward Wiggers Epling

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 ✓

(6) Are Parents Married? yes

(7) DATE OF BIRTH

Jan 26 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Herbert Lake Epling

(9) PRESENT POSTOFFICE OF FATHER

Chapin SC

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

34

(Years)

(12) BIRTHPLACE

Lexington Co SC

(13) OCCUPATION

Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE

Mattie Ophelia Wiggers

(15) PRESENT POSTOFFICE OF MOTHER

Chapin SC

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

32

(Years)

(18) BIRTHPLACE

Lexington Co S.C.

(19) OCCUPATION

Housewife

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

5

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

5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 6:15 P. M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature)

J. S. Seane, M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Little Mountain, S.C.

Given name added from a supplemental report

191...

Registrar

(26) Witness

(Signature of Witness necessary only when question 25 is signed by mark)

(27) Filed

Feb 1 1916

(28)

S. C. Frelmer

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.

Registrar

LOCAL REGISTRAR

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