

(1) PLACE OF BIRTH  
County of Anderson  
Township of Fork  
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

63014

Registration District No. 305 Registered No. 66  
(For use of Local Registrar)  
St.;  
Ward)  
(No. instead of street and number.)  
If child is not yet named, make supplemental report as directed

(2) Full Name of Child

(3) BOY OR GIRL? Girl (4) Twin or Triplet? X (5) Number in order of birth 5 (6) Are Parents Married? yes (7) DATE OF BIRTH June 17 1916  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Savage  
(9) PRESENT POSTOFFICE OF FATHER Townville S.C.  
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27 (Years)  
(12) BIRTHPLACE S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Pelza Simons  
(15) PRESENT POSTOFFICE OF MOTHER Townville S.C.  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 26 (Years)  
(18) BIRTHPLACE S.C.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive, at 5 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. H. H. H.  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife  
Physician Fair Play St.

Given name added from a supplemental report  
191  
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed July 8 1916 (28) R. H. H. H. 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.  
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.