

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

File No.—For State Registrar Only
90542

(1) PLACE OF BIRTH
 County of Lancaster
 Township of Waxhaw
 or
 Inc. Town of Registration District No. 2805 Registered No. 96
 or
 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? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec. 19, 1916
To be answered only in case of twins or triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Ed Anson
 (9) PRESENT POSTOFFICE OF FATHER Fort Mill S.C.
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 34 (Years)
 (12) BIRTHPLACE Lancaster Co. S.C.
 (13) OCCUPATION farm work
 (14) Number of children born to mother, including present birth 1

MOTHER.
 (14) NAME BEFORE MARRIAGE Mariah Anson
 (15) PRESENT POSTOFFICE OF MOTHER Fort Mill S.C.
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 30 (Years)
 (18) BIRTHPLACE Shelby N.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 about 4 A.M. (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Emma Austin (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Fort Mill S.C.

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 12-9-1917 (28) J. H. Leece 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.

