

RECORD OF COLUMBIA FIRST-BORN, No. 1. THIS OFFICE, No. 2, etc., in question 5.

(1) PLACE OF BIRTH
County of Kershaw
Township of Flat Rock
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

File No. — For State Registrar Only
90478

Registration District No. 2722 Registered No. 1563
(For use of Local Registrar)

(2) Full Name of Child { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>✓</u>	(5) Number in order of birth <u>✓</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec. 15-6</u> (Name of Month) (Day) (Year)
FATHER.				MOTHER.
(8) FULL NAME <u>Gas Wright</u>				(14) NAME BEFORE MARRIAGE <u>Lizzie Kestland</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Kershaw SC</u>				(15) PRESENT POSTOFFICE OF MOTHER <u>Kershaw SC</u>
(10) COLOR OR RACE <u>Mulatto</u>		(11) AGE AT LAST BIRTHDAY <u>57</u> (Years)	(16) COLOR OR RACE <u>negro</u>	
(12) BIRTHPLACE <u>Kershaw Co SC</u>		(17) AGE AT LAST BIRTHDAY <u>41</u> (Years)		
(13) OCCUPATION <u>Farmer</u>		(18) BIRTHPLACE <u>Kershaw Co SC</u>		
		(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth { <u>10</u>		(21) Number of children of this mother now living, including present birth { <u>9</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born Alive at 1-30-P M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. R. Givens, M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Kershaw SC

Given name added from a supplemental report 191.....

..... 191.....

Registrar

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

(27) Filed 1-19-1917 (28) J. H. Burfield
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.

When a physician or other person, is called to report on a stillbirth, it must not be reported as a stillbirth before the fifth month of pregnancy.