

(1) PLACE OF BIRTH

County of Amesbury
 Township of Kingstree No. 16
 or
 Inc. Town of Kingstree
 or
 City of Kingstree, S.C.
 (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

79605

Registration District No. 43 A Registered No. 22
 (For use of Local Registrar)

(2) Full Name of Child W. J. Cockfield 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 7th (6) Are Parents Married? yes (7) DATE OF BIRTH Sept. 12, 1916
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wm J. Cockfield(9) PRESENT POSTOFFICE OF FATHER Kingstree S.C.(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 42 (Years)(12) BIRTHPLACE Amesbury County(13) OCCUPATION Deputy Sheriff(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Allie Williamson(15) PRESENT POSTOFFICE OF MOTHER Kingstree S.C.(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 32 (Years)(18) BIRTHPLACE Amesbury County(19) OCCUPATION Housewife(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 8:55 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. D. Jacobs, M.D.(24) State whether Physician or Midwife (25) Address of Physician or Midwife Kingstree, S.C.

Given name added from a supplemental report

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

(27) Filed Sept. 12, 1916 (28) J. S. McButchen 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.

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