

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McGraw, of Columbia.

(1) PLACE OF BIRTH

County of Chas

Township of

or
Inc. Town of

or
City of Chas

(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

71727

Registration District No. 9A

Registered No. 831

(For use of Local Registrar)

(2) Full Name of Child. Earle Bayamon Dunlap

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 Aug 12 - 1914
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Leon Alexander Dunlap

(9) PRESENT POSTOFFICE OF FATHER W. Chas

(10) COLOR OR RACE white

(11) AGE AT LAST BIRTHDAY 22
(Years)

(12) BIRTHPLACE Chas.

(13) OCCUPATION News Agent

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Estelle Breedhorst

(15) PRESENT POSTOFFICE OF MOTHER Charleston

(16) COLOR OR RACE white

(17) AGE AT LAST BIRTHDAY 19
(Years)

(18) BIRTHPLACE Chas

(19) OCCUPATION House work

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive on the date above stated. (Hour A. M. One o'clock)

(23) (Signature) Mrs. W. T. T. T. T.

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

M. D. 84 Nassau 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 5/3/2 1916 (28) 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.