

FORM NO. 4 MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 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.
 McCaw, of Columbia.

(1) PLACE OF BIRTH
 County of Greenville **CERTIFICATE OF BIRTH**
 STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health
 Township of Greenville
 or
 Inc. Town of Bronson Registration District No. 2709 Registered No. 536
 or
 City of Greenville (No. 10 Drooper St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only
85815

(2) Full Name of Child Donald Rush Blakely } 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 10 20 1916
To be answered only in case of twins or triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Rush Cowley Blakely
 (9) PRESENT POSTOFFICE OF FATHER Greenville S.C. 10 Drooper St.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 33 (Years)
 (12) BIRTHPLACE Greenville S.C.
 (13) OCCUPATION Mill tuncer
 (20) Number of children born to mother, including present birth 3

MOTHER.
 (14) NAME BEFORE MARRIAGE Sarah Pauline Bellinger
 (15) PRESENT POSTOFFICE OF MOTHER Greenville S.C. 10 Drooper St.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)
 (18) BIRTHPLACE Greenville S.C. (Co)
 (19) OCCUPATION Housewife
 (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 at 3 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. J. Gile M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife
Physician Greenville 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)
Nov 19 1916 (27) Filed 1916 (28) A. H. Mackey 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.