

FORM NO. 3

(1) PLACE OF BIRTH

County of CharlestonTownship of Santeeor
Inc. Town ofor
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

44911

Registration District No. 4206 Registered No. 36
(For use of Local Registrar)

St.; Ward

(2) Full Name of Child. Not named } 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 one(6) Are Parents Married? yes(7) DATE OF BIRTH Dec 2 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Hayes Dawkins(9) PRESENT POSTOFFICE OF FATHER Santee(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 22 (Years)(12) BIRTHPLACE Santee S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Mandy Meador(15) PRESENT POSTOFFICE OF MOTHER Santee S.C.(16) COLOR OR RACE Negro(17) AGE AT LAST BIRTHDAY 23 (Years)(18) BIRTHPLACE Santee S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) Alvin Neal(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Santee 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 8th 1916(28) J. P. Thomas 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.

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.