

(1) PLACE OF BIRTH

County of Chester

Township of Halsellville

Inc. Town of

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 1164 Registered No. 3
(For use of Local Registrar)

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
45760

(2) Full Name of Child L. S. Price } 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 10 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 9 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Lake Price
(9) PRESENT POSTOFFICE OF FATHER Chester S.C.
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 28 (Years)
(12) BIRTHPLACE Chester Co.
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 10

MOTHER.
(14) NAME BEFORE MARRIAGE Caroline Johnson
(15) PRESENT POSTOFFICE OF MOTHER Chester S.C.
(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 25 (Years)
(18) BIRTHPLACE Chester S.C.
(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 alive, at 8 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Irma Rawles

(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Chester S.C.

Given name added from a supplemental report

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

(27) Filed Jan 11 1916 (28) L. J. McDaniel 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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FIRST-BORN. No. 1. THE OTHERS. No. 2, etc., in question 5.

McCaw of Columbia

M. I.

McCaw

THIS IS TO BE KEPT IN THE OFFICE OF THE REGISTRAR FOR THE COUNTY OF CHESTER, SOUTH CAROLINA, UNTIL THE CHILD IS REGISTERED.