

(1) PLACE OF BIRTH

County of York

Township of York

or
Inc. Town of York

City of York
(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

85204

Registration District No. 1502 Registered No. 124

(For use of Local Registrar)

St. St. Ward Ward

(2) Full Name of Child William W. Wooten

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

To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Oct. 17, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William W. Wooten

(9) PRESENT POSTOFFICE OF FATHER York

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 29 (Years)

(12) BIRTHPLACE York

(13) OCCUPATION Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Myra W. Wooten

(15) PRESENT POSTOFFICE OF MOTHER York

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31 (Years)

(18) BIRTHPLACE York

(19) OCCUPATION Wife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive, at York, SC, on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) S. B. ...

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

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 Mar. 5, 1916 (28) H. Eugene Davis 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.

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5. McCaw of Columbia.