

(1) PLACE OF BIRTH

County of AndersonTownship of Rock Millsor
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

63063

Registration District No. 312 Registered No.
(For use of Local Registrar)

St.; Ward

(2) Full Name of Child

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>L</u>	(5) Number in order of birth <u>4</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>May 8, 1916</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Wm Frank Hatcher(9) PRESENT POSTOFFICE OF FATHER Anderson S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 33
(Years)(12) BIRTHPLACE Hart Co Ia(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Corinne Elrod(15) PRESENT POSTOFFICE OF MOTHER Anderson S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 33
(Years)(18) BIRTHPLACE Anderson S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) J. H. Johnson(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Physician Townville 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 July 5, 1916 (28) J. D. Wright
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.

MARRIAGE RECORDS, STATE PRINTING, WILMINGTON, N. C.—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