

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.

McAW, of Columbia

(1) PLACE OF BIRTH  
 County of Pickens  
 Township of Liberty SC  
 or  
 Inc. Town of ..... Registration District No. 3705 Registered No. 3  
 or  
 City of ..... (No. .... St. .... Ward)  
 (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

47168

(2) Full Name of Child Willis Hurlston Chapman } 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 ..... (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 23, 1916  
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Almon Dewitt Chapman(9) PRESENT POSTOFFICE OF FATHER Liberty SC(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27  
(Years)(12) BIRTHPLACE Pickens Co., S. C.(13) OCCUPATION Banker clerk(20) Number of children born to mother, including present birth 1

## MOTHER.

(14) NAME BEFORE MARRIAGE Otis Elizabeth Dell(15) PRESENT POSTOFFICE OF MOTHER Liberty SC(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 27  
(Years)(18) BIRTHPLACE Pickens Co SC(19) OCCUPATION House work(21) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 2 P M., on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) William A. Sheldon

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

Physician Liberty SC

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 Feb 2 1916 (28) John T. Bogan 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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