

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. 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.

(1) PLACE OF BIRTH
CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

County of Townsend
 Township of Blythe
 Inc. Town of Blythe
 City of Blythe (No. 3800 St. 169 Ward)

Registered No. 169
 (For use of Local Registrar)

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

File No.—For State Registrar Only
91554

(2) Full Name of Child Johnnie Lee

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec 29</u> 19 <u>16</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Johnnie Lee</u>			(14) NAME BEFORE MARRIAGE <u>Johnnie Lee</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Blythe</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Blythe</u>	
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY (Years) <u>2</u>	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY (Years) <u>2</u>	
(12) BIRTHPLACE <u>Blythe</u>			(18) BIRTHPLACE <u>Blythe</u>	
(13) OCCUPATION <u>Householder</u>			(19) OCCUPATION <u>Housekeeper</u>	
(20) Number of children born to mother, including present birth <u>2</u>			(21) Number of children of this mother now living, including present birth <u>2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*
 (22) I hereby certify that I attended the birth of this child, who was born at 11 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Johnnie Lee
 (24) State whether Physician or Midwife Physician Address of Physician or Midwife Blythe

Given name added from a supplemental report _____
 (25) Witness Johnnie Lee (Signature of Witness necessary only when question 23 is signed by mark)
 (26) Filled Dec 30 1916 (28) W. A. McLean 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.