

**CERTIFICATE OF BIRTH**

County of Hampton, S.C. STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 Township of Deepwater, S.C. State Board of Health

File No.—For State Registrar Only  
**90295** 58

or Inc. Town of ..... Registration District No. 7002 Registered No. 280  
 or (For use of Local Registrar)  
 City of ..... (No. .... St.; .... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child not named If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>1</u>	(5) Number in order of birth <u>1st</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec 24 1916</u> (Name of Month) (Day) (Year)
FATHER		MOTHER		
(8) FULL NAME <u>Anderson O'Briant</u>	(14) NAME BEFORE MARRIAGE <u>Ellerwise from</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>varnville, S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>varnville, S.C.</u>			
(10) COLOR OR RACE <u>white</u>	(11) AGE AT LAST BIRTHDAY <u>41 mon</u> (Years)	(16) COLOR OR RACE <u>white</u>	(17) AGE AT LAST BIRTHDAY <u>41 mon</u> (Years)	
(12) BIRTHPLACE <u>Deepwater, S.C.</u>	(18) BIRTHPLACE <u>Deepwater, S.C.</u>			
(13) OCCUPATION <u>wages hand at mill</u>	(19) OCCUPATION <u>house work</u>			
(20) Number of children born to mother, including present birth <u>one</u>	(21) Number of children of this mother now living, including present birth <u>one</u>			

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was alive at Midwell on the date above stated.  
 (Born alive or stillborn) (Hour A. M. or P. M.) 9:30

(23) (Signature) M. C. Gooding

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

Given name added from a supplemental report

not named 191.....  
G. Gooding Registrar

(26) Witness Mrs. O'Briant  
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec 30 1916 (28) H. W. Rogers 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.

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