

FORM NO. 4 MARGIN RESERVED FOR FINDING. WHEN FATHER WITH UPWARDING IN THIS IS A CERTAIN 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.

MAC McGraw, of Columbia

(1) PLACE OF BIRTH

County of Union
Township of Pinebluff
or
Inc. Town of Kelton
or
City of Union Co (No. 89)
(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

83761

Registration District No. 4-2-3 Registered No. 8-2
(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL? X

(4) Twin or Triplet? X

(5) Number in order of birth X

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Oct 12 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Giles L. Sanders

(9) PRESENT POSTOFFICE OF FATHER Kelton 89

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 44 (Years)

(12) BIRTHPLACE Union Co 89

(13) OCCUPATION Mechanist & Postmaster

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

MOTHER.

(14) NAME BEFORE MARRIAGE Hettie Wright

(15) PRESENT POSTOFFICE OF MOTHER Kelton 89

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 39 (Years)

(18) BIRTHPLACE Union Co 89

(19) OCCUPATION Domestic

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 5 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. H. Hope

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Union 89

Given name added from a supplemental report

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Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Oct 15 1916 (28) J. G. Gallman 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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