

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Spartanburg

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. For State Registrar Only
50450

Township of Campbell
or
Inc. Town of Registration District No. 4001-a Registered No. 11
(For use of Local Registrar)
or
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 Percy Bryant { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? by (4) Twin or Triplet? 1 (5) Number in order of birth 9 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 21 1906
To be answered only in event of twins or triplets (Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME R. A. Bryant
(9) PRESENT POSTOFFICE OF FATHER Campbell S.C.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 37-4 (Years)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 9

MOTHER.
(14) NAME BEFORE MARRIAGE Susan McAdams
(15) PRESENT POSTOFFICE OF MOTHER Campbell
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 37 (Years)
(18) BIRTHPLACE NC
(19) OCCUPATION House wife
(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 3:45 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) D. E. Messinger

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

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 Mar 10 1906 (28) C. L. Maskey 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.

Registrar | Local Registrar

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FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
McCaw, of Columbia