

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 6.
 McCay, of Columbia.

(1) PLACE OF BIRTH

County of Greenville

Township of Gantt

or
 Inc. Town of

or
 City of

(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

13008

Registration District No. 220.7 Registered No. 4.3
 (For use of Local Registrar)

St.; Ward)

(2) Full Name of Child Infant

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 1

(6) Are Parent(s) Married? Yes

(7) DATE OF BIRTH Dec. 14, 1911
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Claude Surrency

(9) PRESENT POSTOFFICE OF FATHER Greenville S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 26 (Years)

(12) BIRTHPLACE Greenville S.C.

(13) OCCUPATION Well Operator

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Marie Smith

(15) PRESENT POSTOFFICE OF MOTHER Greenville S.C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 26 (Years)

(18) BIRTHPLACE Greenville S.C.

(19) OCCUPATION Housewife

(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 1:20 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. B. Hendrix

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

Physician Greenville, S.C.

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 Dec. 14, 1911 (28) E. B. Hendrix 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.