

WHITE 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 5.

(1) PLACE OF BIRTH

County of Harney
Township of Buckles
or
Inc. Town of _____
or
City of _____

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

Registration District No. 2501

File No.—For State Registrar Only

4583

Registered No. 13
(For use of Local Registrar)

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

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

(3) BOY OR GIRL? girl (4) Twin or Triplet? _____ (5) Number in order of birth _____ (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 29, 1912
(State of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME	<u>Jas. Herman Hendrick</u>	(14) NAME BEFORE MARRIAGE	<u>Olivia Cannon</u>
(9) PRESENT POSTOFFICE OF FATHER	<u>Conway R. D. 2</u>	(15) PRESENT POSTOFFICE OF MOTHER	<u>Conway S. C. R. 2</u>
(10) COLOR OR RACE	<u>white</u>	(16) COLOR OR RACE	<u>white</u>
(11) AGE AT LAST BIRTHDAY	<u>40</u>	(17) AGE AT LAST BIRTHDAY	<u>35</u>
(12) BIRTHPLACE	<u>Harney Co.</u>	(18) BIRTHPLACE	<u>Harney Co.</u>
(13) OCCUPATION	<u>Farming</u>	(19) OCCUPATION	<u>Domestic</u>
(20) Number of children born to mother, including present birth	<u>5</u>	(21) Number of children of this mother now living, including present birth	<u>5</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 11 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dr. J. S. Dunsberry
(24) State whether Physician (25) Address of Physician or Midwife Conway S. C.

Given name added from a supplemental report

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

(27) Filed Feb. 24, 1912 J. S. Cannon 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.