

MARGIN RESERVED FOR BINDING.

WRITES 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

State of Columbia

(1) PLACE OF BIRTH

County of GreenvilleTownship of Fairview

Inc. Town of

City of

(If birth occurs in a hospital or (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 Loula May Gary

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? one (5) Number in order of birth 1
To be answered only in case of twins or triplets(6) Are Parents Married? Yes(7) DATE OF BIRTH Jan. 1, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Ernest Earl Gary(9) PRESENT POSTOFFICE OF FATHER Ft & Inn S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 29 (Years)(12) BIRTHPLACE Ft & Inn S.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Lilly Thackston(15) PRESENT POSTOFFICE OF MOTHER Ft & Inn S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)(18) BIRTHPLACE Laurina Co(19) OCCUPATION House wife(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 born alive at Greenville on the date above stated.(23) (Signature) N. L. Shaw (Home M. or P. M.)(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Ft. Inn S.C.

Given name added from a supplemental report

June 29, 1916Greenville Registrar

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

(27) Filed March 10, 1916 (28) J. B. Dickson 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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

18259

Registration District No. 2206 Registered No. 11
(For use of Local Registrar)