

Form No. 1

(1) PLACE OF BIRTH

County of WilliamsburgTownship of Indianor
Inc. Town ofor
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

54044

Registration District No. 4303 Registered No. 12

(For use of Local Registrar)

(2) Full Name of Child Philip White { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
				<u>Mar 10 1914</u>
				(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John White(9) PRESENT POSTOFFICE OF FATHER Casper(10) COLOR OR RACE B (11) AGE AT LAST BIRTHDAY 24 (Years)(12) BIRTHPLACE Wm.burg(13) OCCUPATION Farm Hand(19) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Paul Barr(15) PRESENT POSTOFFICE OF MOTHER Casper(16) COLOR OR RACE B (17) AGE AT LAST BIRTHDAY 23 (Years)(18) BIRTHPLACE Wm.burg(19) OCCUPATION Home Wife(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) M. J. P. P. P.

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

Midwife Casper

Given name added from a supplemental report

(26) Witness John X. White

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

(27) Filed Mar 11 1914 (28) C. C. Daniel 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.

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.