

## (1) PLACE OF BIRTH

County of Greenwood  
 Township of Callison  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
**90187**

Registration District No. 7301

Registered No. 49  
 (For use of Local Registrar)

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

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec. 20, 1917  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.  
 (8) FULL NAME Roland Deal  
 (9) PRESENT POSTOFFICE OF FATHER Troy L.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 73  
 (12) BIRTHPLACE Greenwood Co  
 (13) OCCUPATION Saw milling  
 (20) Number of children born to mother, including present birth 3

MOTHER.  
 (14) NAME BEFORE MARRIAGE Allie Rush  
 (15) PRESENT POSTOFFICE OF MOTHER Troy L.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 77  
 (18) BIRTHPLACE Greenwood Co  
 (19) OCCUPATION House wife  
 (21) Number of children of this mother now living, including present birth 3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) J. L. Ward

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Physician Greenwood S.C.

Given name added from a supplemental report

May 16, 1917  
Clayton  
Super Registrar

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

(27) Filed Jan 6, 1917 (28) P. J. Person 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.

RECEIVED BY THE REGISTRAR, GREENWOOD COUNTY, S. C.