

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

File No. For State
 71219

(1) PLACE OF BIRTH
 County of Anderson
 Township of Millionston
 or
 Inc. Town of Pelzer S.C.
 or
 City of _____ (No. _____ St.; _____ Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 3-D Registered No. 82
 (For use of Local Registrar)

(2) Full Name of Child Garvin Woodward { 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 _____ (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 2nd 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Ransom Woodward
 (9) PRESENT POSTOFFICE OF FATHER Millionston S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 21 (Years)
 (12) BIRTHPLACE Anderson Co S.C.
 (13) OCCUPATION Mill work
 (20) Number of children born to mother, including present birth 2

MOTHER.
 (14) NAME BEFORE MARRIAGE Bessie Caldwell
 (15) PRESENT POSTOFFICE OF MOTHER Pelzer S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 19 (Years)
 (18) BIRTHPLACE Anderson Co S.C.
 (19) OCCUPATION Domestic
 (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 3 9 M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. J. Motley
 (24) State whether Physician or Midwife Physician (25) Address Pelzer S.C.

Given name added from a supplemental report
 _____ 191_____

 Registrar

(26) Witness _____ (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Sep. 10. 1916. (28) Francis J. Roberts 3rd 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.

McCraw, of Columbia
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 IN CASE OF TWINS OR TRIPLETS, GIVE A SEPARATE RETURN FOR EACH CHILD, AND NUMBER THE