

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

File No. — For State Registrar Only
85871

(1) PLACE OF BIRTH
 County of Greenville
 Township of Oak Lawn
 OR
 Inc. Town of Registration District No. 2212 Registered No. 60
 OR
 City of (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 James } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? BOY GIRL
 (4) Twin or Triplet? Yes No
 (5) Number in order of birth 1
 (6) Are Parents Married? Yes No
 (7) DATE OF BIRTH Nov 27, 1916
(Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Alven Babo
 (9) PRESENT POSTOFFICE OF FATHER Relzer S.C.
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 28
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farm hand
 (20) Number of children born to mother, including present birth 1

MOTHER.
 (14) NAME BEFORE MARRIAGE Marie Ware
 (15) PRESENT POSTOFFICE OF MOTHER Relzer S.C.
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 18
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife
 (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 6 P.M. (Born alive or stillborn) (Hour A. M. or P. M.)
 on the date above stated.
 (23) (Signature) M. A. Moore, M.D.
 (24) State whether Physician or Midwife Physician Midwife
 (25) Address of Physician or Midwife Relzer 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 Nov. 1916. (28) W. A. York Local Registrar.

MARGIN RESERVED FOR BINDING.
 WRITE 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.
 McCaw, of Columbia.

*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.