

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use SEPARATE BLANKS FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 6.

(1) PLACE OF BIRTH

County of Newberry
 Township of 2
 or
 Inc. Town of.....
 or
 City of..... (No. St.; Ward)
 (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
19515

Registration District No. 3. 4. 5. 6. Registered No. 20
 (For use of Local Registrar)

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet?	(5) Number in order of birth <u>3rd</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>May 25 1922</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Wozier Kincaid</u>			(14) NAME BEFORE MARRIAGE <u>Charlotte Rutherford</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Newberry S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Newberry S.C.</u>	
(10) COLOR OR RACE <u>Black</u>		(11) AGE AT LAST BIRTHDAY <u>26</u> (Years)	(17) AGE AT LAST BIRTHDAY <u>27</u> (Years)	
(12) BIRTHPLACE <u>South Carolina</u>			(18) BIRTHPLACE <u>Newberry Co.</u>	
(13) OCCUPATION <u>Saw mill hand.</u>			(19) OCCUPATION <u>House keeper</u>	
(20) Number of children born to mother, including present birth <u>1. 3</u>			(21) Number of children of this mother now living, including present birth <u>1. 2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9:15 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sylvia Rutherford
 (24) State whether Physician or Midwife
 (25) Address of Physician or Midwife Blair S.C.

Given name added from a supplemental report
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Jan 15 1922 James S. Hoff 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.