

Form No. 1

(1) PLACE OF BIRTH

County of YorkTownship of Rock Hillor Rock HillCity of Rock Hill

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

(2) Full Name of Child

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

79735

Registration District No. 44 B Registered No. 152
(For use of Local Registrar)(No. St.; Ward)

If child is not yet named, make supplemental report as directed

(3) SEX OR AGE? boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH August 14 1916
(Name of Month) (Day) (Year)

FATHER.

(8) TELL NAME B. Columbus Small(9) PRESENT POSTOFFICE OF FATHER Rock Hill, S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 35 (Years)(12) BIRTHPLACE N.C.(13) OCCUPATION Truck Driver(14) Number of children born to mother, including present birth Five

MOTHER.

(14) NAME BEFORE MARRIAGE Maggie Lowry Small(15) PRESENT POSTOFFICE OF MOTHER Rock Hill, S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 32 (Years)(18) BIRTHPLACE Chesterfield(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(21) I hereby certify that I attended the birth of this child, who was born at Rock Hill, S.C. (Hour A. M. or P. M.)
on the date above stated. (Born alive or stillborn)(22) (Signature) H. K. Robinson(23) State whether Physician or Midwife Physician (24) Address of Physician or Midwife Rock Hill

(25) Give name added from a supplemental report

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

(27) Filed 9/21/16 (28) J. M. M. 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.