

Form No. 1

### CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

74658

(1) PLACE OF BIRTH

County of Spartanburg  
Township of Beech Springs

Registration District No. 40-C Registered No. 1419  
(For use of Local Registrar)

or  
Inc. Town of ..... St.; ..... Ward

or  
City of ..... (No. ....) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Carl Towery } 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. 25 1916  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME J. S. Towery

(9) PRESENT POSTOFFICE OF FATHER Inman S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 56 (Years)

(12) BIRTHPLACE W.C.

(13) OCCUPATION Weaver in Cotton Mill

(14) Number of children born to mother, including present birth } ..... 9.....

**MOTHER.**

(14) NAME BEFORE MARRIAGE Lily Roads

(15) PRESENT POSTOFFICE OF MOTHER Inman S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 40 (Years)

(18) BIRTHPLACE W.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth } ..... 8.....

#### CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive (born alive or stillborn) 6:30 P. M., on the date above stated. (Hour, M. or P. M.)

(23) (Signature) W. J. P. Harman M.D.  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Inman S.C.

Given name added from a supplemental report

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

(27) Filed Aug 26 1916 (28) W. J. P. Harman 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.