

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

File No. — For State Registrar Only
 74682

(1) PLACE OF BIRTH
 County of Spartanburg
 or
 Township of Woodruff S.C.
 or
 Inc. Town of Woodruff
 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. 40.B Registered No. 40
 (For use of Local Registrar)

(2) Full Name of Child Annies Mae Montgomery } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? _____ (5) Number in order of birth _____ (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug. 13, 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Glover Montgomery
 (9) PRESENT POSTOFFICE OF FATHER Woodruff S.C. R#4
 (10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 24 (Years)
 (12) BIRTHPLACE Spartanburg Co
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Annies Mae Allen
 (15) PRESENT POSTOFFICE OF MOTHER Woodruff S.C. R#4
 (16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 30 (Years)
 (18) BIRTHPLACE Spartanburg Co
 (19) OCCUPATION House keep
 (21) Number of children of this mother now living, including present birth three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 6 (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) D. A. Workman
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Woodruff 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 Sept. 11, 1916 (28) Charles J. Boyter 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.

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