

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only
75010

County of Union

Township of Fish Dam

Inc. Town of Registration District No. 4203 Registered No. 33
(For use of Local Registrar)

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 Frank Sims { 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 7 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 8 1916
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Wash Sims

(14) NAME BEFORE MARRIAGE Mary Hamilton

(9) PRESENT POSTOFFICE OF FATHER Carlisle

(15) PRESENT POSTOFFICE OF MOTHER Carlisle

(10) COLOR OR RACE Red (11) AGE AT LAST BIRTHDAY 33 (Years)

(16) COLOR OR RACE Red (17) AGE AT LAST BIRTHDAY 29 (Years)

(12) BIRTHPLACE S.C.

(18) BIRTHPLACE S.C.

(13) OCCUPATION Farming

(19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth { 7

(21) Number of children of this mother now living, including present birth { 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Frances De Jarnett

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Carlisle, S.C.

Given name added from a supplemental report

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

....., 191.....
Registrar

(27) Filed Aug 26 1916 (28) P. H. Jeter 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.

MARGIN RESERVED FOR BINDING.
WRITE FULLY, 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.
Law of Columbia.