

(1) PLACE OF BIRTH  
**CERTIFICATE OF BIRTH**

County of Richland STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 Township of Blythewood State Board of Health

File No.—For State Registrar Only

70166

Inc. Town of ..... Registration District No. 3800 Registered No. 91  
 or  
 City of ..... (For use of Local Registrar)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Ernest Washington { If child is not yet named, make supplemental report as directed

(3) BOY OR (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 28, 1916  
 To be answered only in event of Twin or Triplets (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Clair Washington

(9) PRESENT POSTOFFICE OF FATHER Blythewood

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 26 (Years)

(12) BIRTHPLACE Richland Co S.C.

(13) OCCUPATION works on farm

(20) Number of children born to mother, including present birth 5

## MOTHER.

(14) NAME BEFORE MARRIAGE Emma Turnipseed

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

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Fairfield Co S.C.

(19) OCCUPATION field hand

(21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 9:00 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lena Alston

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Blythewood 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 8/4 6 (28) Wm McLean 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.

THIS IS A PERMANENT RECORD.  
 IN CASE OF TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and make the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.  
 McCaw, of Columbia.