

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. H.—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 8.
McGraw, of Columbia

(1) PLACE OF BIRTH

County of Chester

Township of Chester

or
Inc. Town of
or
City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

88975

Registration District No. 1102 Registered No. 107

(For use of Local Registrar)

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

(3) BOY OR GIRL? boy (4) Twin or Triplet? one (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec. 25 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Joe Boyd

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

(10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 32 (Years)

(12) BIRTHPLACE Chester County

(13) OCCUPATION Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Bessie Archie

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

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

(18) BIRTHPLACE Chester County

(19) OCCUPATION Housewife

(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 born at 1 o'clock, A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Vella Peterson (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Chester S. C.

Given name added from a supplemental report

(26) Witness Phily B. Annot (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec 26 1916 (28) Jess Hunch 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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