

MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, 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.

Revised by Columbia, Columbia, S. C.

(1) PLACE OF BIRTH
 County of Sumter
 Township of Privateer
 or
 Inc. Town of
 or
 City of (No. St.; Ward.)
 (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
83657

Registration District No. 494 Registered No. 121
 (For use of Local Registrar)

(2) Full Name of Child Diane Andrews If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL: Boy (4) Twin or Triplet? No (5) Number in order of birth No (6) Are Parents Married? No (7) DATE OF BIRTH: Oct 28, 1916
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME
 (9) PRESENT POSTOFFICE OF FATHER
 (10) COLOR OR RACE (11) AGE AT LAST BIRTHDAY
 (12) BIRTHPLACE
 (13) OCCUPATION
 (20) Number of children born to mother, including present birth 2

MOTHER.
 (14) NAME BEFORE MARRIAGE Alice Andrews
 (15) PRESENT POSTOFFICE OF MOTHER Findal A.P.R.#1
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 18
 (18) BIRTHPLACE Sumter Co, SC
 (19) OCCUPATION General House & fieldwork
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Grady Andrews
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Findal A.P.R.#1

Given name added from a supplemental report

(26) Witness (Signature) Alas B. Koff
 (27) Local Registrar (Signature) Alas B. Koff

*When there is no attending physician or midwife, the father, grandfather, etc., should make this statement. If a stillborn child is even once, it must not be reported as stillborn. No report is desired of stillbirths before the child is born and is dead.