

FORM NO. 6 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.

McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Spartanburg
Township of
or
Inc. Town of Woodruff S.C.
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
74820

Registration District No. 4009 Registered No. 94
(For use of Local Registrar)

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

(3) BOY OR GIRL? Boy (4) Twin BILLY or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Aug. 16, 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Sumpter Ben Parker Jr

(14) NAME BEFORE MARRIAGE Minnie Bowen Westwood

(9) PRESENT POSTOFFICE OF FATHER Woodruff S.C. R#1

(15) PRESENT POSTOFFICE OF MOTHER Woodruff S.C. R#1

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27 (Years)

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

(12) BIRTHPLACE Spartanburg Co

(18) BIRTHPLACE Spartanburg Co

(13) OCCUPATION Farmer

(19) OCCUPATION House Keeper

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

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Dr. A. A. Workman

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

Physician | Woodruff 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 Sept 11, 1916 (28) Chas. Z. Byler 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.