

## (1) PLACE OF BIRTH

County of FlourTownship of Flour

Inc. Town of .....

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

42849

Registration District No. 2012 Registered No. 122

(For use of Local Registrar)

(2) Full Name of Child. Elizabeth Myrtle Knight

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>One</u> Is he present only in case of twins or triplets?	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Oct 29</u> (Name of Month) (Day) (Year)
------------------------------	---	---------------------------------------	-------------------------------------	---

## FATHER.

(8) FULL NAME Herbert M. Knight(9) PRESENT POSTOFFICE OF FATHER Scranton, SC.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 19 (Years)(12) BIRTHPLACE Flour Co.(13) OCCUPATION Farmer.(20) Number of children born to mother, including present birth One.

## MOTHER.

(14) NAME BEFORE MARRIAGE Catharine B. Floyd(15) PRESENT POSTOFFICE OF MOTHER Scranton, SC.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18 (Years)(18) BIRTHPLACE Flour Co.(19) OCCUPATION Housewife.(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 born alive at 10:30 A.M. on the date above stated. (Born alive or stillborn) (Hour & M. or P.M.)(23) (Signature) R. C. Floyd, M.D.(24) State whether Physician or Midwife (25) Address of Physician or Midwife Flour Co.

Given name added from a supplemental report

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

(27) Filed Jan 11 1916 (28) R. C. Kelly 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.

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.