

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 number the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.  
McCaw, of Columbia.

## (1) PLACE OF BIRTH

County of HorryTownship of Lemmonor  
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

77527

Registration District No. 2502 Registered No. 140

(For use of Local Registrar)

(2) Full Name of Child. Richard J. Manning

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>3</u> <small>To be answered only in case of Twins or Triplets</small>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Sept 9 1916</u> <small>(Name of Month) (Day) (Year)</small>
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## FATHER.

(8) FULL NAME Richard M. Heald(9) PRESENT POSTOFFICE OF FATHER Lemmon SC(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 32  
(Years)(12) BIRTHPLACE Horry Co(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 3

## MOTHER.

(14) NAME BEFORE MARRIAGE Carrie May Roberts(15) PRESENT POSTOFFICE OF MOTHER Lemmon SC(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 25  
(Years)(18) BIRTHPLACE Horry Co(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 13

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 1 A.M., on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Sallie Powell

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

MidwifeLemmon

Given name added from a supplemental report

(26) Witness

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

(27) Filed Sept 16 1916

(28)

J. S. Dwyer 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.