

(1) PLACE OF BIRTH
 County of Sumter
 Township of Shiloh
 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
50603

Registration District No. 4-10-7 Registered No. 16
 (For use of Local Registrar)

(2) Full Name of Child. Charles Goodman If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? 3 (5) Number in order of birth 3 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 7 1916
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Lake Goodman
 (9) PRESENT POSTOFFICE OF FATHER Lynchburg, S.C.
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 23 (Years)
 (12) BIRTHPLACE Sumter, S.C.
 (13) OCCUPATION Farming
 (14) Number of children born to mother, including present birth 2

MOTHER.
 (14) NAME BEFORE MARRIAGE Hattie Lourey
 (15) PRESENT POSTOFFICE OF MOTHER Lynchburg, S.C.
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 19 (Years)
 (18) BIRTHPLACE Sumter, S.C.
 (19) OCCUPATION Housekeeping
 (20) 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 Alive at 10 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Wade McElveen
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Lynchburg, S.C.

Given name added from a supplemental report
 _____, 191____

 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Feb 15 1916 (28) W. McElveen 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.

& CHILD DISCLOSED EVER SINCE, IS MUST NOT BE REPORTED AS STILLBORN BEFORE THE FIFTH MONTH OF PREGNANCY.

(Copy from original in file)