

WHEN PLAINLY VISIBLE UNLESS IN 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.

(1) PLACE OF BIRTH

County of Charleston

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. 88857 Registrar Only

Township of St. Phillips

or Chicora

Inc. Town of Chicora

City of Chicora

Registration District No. 902

Registered No. 164

(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child John Bateman

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? — (5) Number in order of birth 3rd (6) Are Parents Married? yes (7) DATE OF BIRTH Dec. 18, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Dominick Bateman

(9) PRESENT POSTOFFICE OF FATHER Navy Yard, Charleston S.C.

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

(12) BIRTHPLACE Washington, D.C.

(13) OCCUPATION Watchman

(20) Number of children born to mother, including present birth Three

MOTHER.

(14) NAME BEFORE MARRIAGE Grace Irene Hale

(15) PRESENT POSTOFFICE OF MOTHER Navy Yard, Charleston S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Washington, D.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 5:05 A.: M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Heber Butts

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

P. A. Surgeon, U.S. Navy. Navy Yard, Charleston 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 Dec. 19, 1916 (28) G. F. Myers 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.

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