

(1) PLACE OF BIRTH

County of KershawTownship of Buffaloor
Inc. Town ofor
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

90453

Registration District No. 2700 Registered No. 149

(For use of Local Registrar)

(2) Full Name of Child James Randolph Robinson child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? X (7) DATE OF BIRTH Dec 8 1916
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Lee Robinson(9) PRESENT POSTOFFICE OF FATHER Kershaw S.C. R.D. #6(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)(12) BIRTHPLACE Lancaster Co. S.C.(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 3

MOTHER

(14) NAME BEFORE MARRIAGE Emmie Small(15) PRESENT POSTOFFICE OF MOTHER Kershaw S.C. R.D. #6(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Years)(18) BIRTHPLACE Lancaster Co. S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Edgar D. ...
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Kershaw S.C. #6

Given name added from a supplemental report

Mary H. 1917
W. H. ...
Supv. Registrar

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

(27) Filed Jan 7 1917 (28) J. H. ... 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.

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.
McGraw, of Columbia.