

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 mark the

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

Chav. of Columbia.

(1) PLACE OF BIRTH  
 County of Greenville  
 Township of Dewcler  
 or  
 Inc. Town of ..... Registration District No. 2208 Registered No. 75  
 or  
 City of ..... (No. .... St.; ..... Ward)  
 (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  
**72953**

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? (5) Number in order of birth 9 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug. 22, 1911  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME John J. Chapman  
 (9) PRESENT POSTOFFICE OF FATHER Joney Creek, S. C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 39 (Years)  
 (12) BIRTHPLACE Greene Co. So. Car.  
 (13) OCCUPATION Farming  
 (20) Number of children born to mother, including present birth } ..... 9 .....

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Geneva Brown  
 (15) PRESENT POSTOFFICE OF MOTHER Joney Creek, S. C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 35 (Years)  
 (18) BIRTHPLACE Greene Co. So. Car.  
 (19) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth } ..... 9 .....

### CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) .....  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife  
Greene Co. So. Car.

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 Sept. 1911 (28) C. D. Smith 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.