

(1) PLACE OF BIRTH

County of Horry  
Township of Pocahontas  
or  
Inc. Town of Fidelity  
or  
City of .....

CERTIFICATE OF BIRTH  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only  
**90300**

Registration District No. 2403 Registered No. 73  
(For use of Local Registrar)

(No. .... St.; .... Ward)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Howard Wright If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet?  To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 9 16  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Morris Wright  
(9) PRESENT POSTOFFICE OF FATHER Fidelity  
(10) COLOR OR RACE Wpo (11) AGE AT LAST BIRTHDAY 22  
(Years) (12) BIRTHPLACE R.  
(13) OCCUPATION Saw mill work  
(20) Number of children born to mother, including present birth One

MOTHER.  
(14) NAME BEFORE MARRIAGE Verdie Singleton  
(15) PRESENT POSTOFFICE OF MOTHER Fidelity SC  
(16) COLOR OR RACE Wpo (17) AGE AT LAST BIRTHDAY 27  
(Years) (18) BIRTHPLACE SC  
(19) OCCUPATION House work  
(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 5:00 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lana X Williams  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Fidelity SC

Given name added from a supplemental report  
(26) Witness J.D. McLean  
(Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Dec 16 16 (28) J.D. McLean 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.

DEPT. OF COLUMBIA, COLUMBIA, S. C.