

MARGIN RESERVED FOR BINDING.
 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.

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

File No.—For State Registrar Only
 86166

(1) PLACE OF BIRTH
 County of Kershaw
 Township of
 or
 Inc. Town of
 or
 City of Canden (No. 100 St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 27-a Registered No. 72
 (For use of Local Registrar)

(2) Full Name of Child Julius Thaddeus Stratford (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 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 13 1916
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Robert Stratford</u>	(14) NAME BEFORE MARRIAGE <u>Bessie Deless</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Canden</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Canden</u>
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>30</u>	(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>40</u>
(12) BIRTHPLACE <u>Longtown S.C.</u>	(13) OCCUPATION <u>Day labour</u>	(18) BIRTHPLACE <u>S.C.</u>	(19) OCCUPATION <u>Housewife</u>
20) Number of children born to mother, including present birth <u>10</u>	21) Number of children of this mother now living, including present birth <u>3</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Oliver Doss
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Canden

Given name added from a supplemental report

 19 Registrar

(26) Witness W. J. Wingo (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Oct 13 1916 (28) W. J. Wingo 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.

MOCCAW OF COLUMBIA, COLUMBIA, S. C.