

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.

(1) PLACE OF BIRTH
 County of Hampton
 Township of Polkville
 or
 Inc. Town of Early Branch
 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
77492

Registration District No. 7403 Registered No. 53
 (For use of Local Registrar)

(2) Full Name of Child Lois Magdelaine Dickson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth Sixth (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 24 1916
To be answered only in event of Twins or Triplets (Name of month) (Day) (Year)

FATHER.
 (8) FULL NAME Carl F. W. Ficken
 (9) PRESENT POSTOFFICE OF FATHER Early Branch S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30
(Years)
 (12) BIRTHPLACE Early Branch S.C.
 (13) OCCUPATION Farmer

MOTHER.
 (14) NAME BEFORE MARRIAGE Rebecca W. Jenny
 (15) PRESENT POSTOFFICE OF MOTHER Early Branch S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34
(Years)
 (18) BIRTHPLACE Barnwell County S.C.
 (19) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth Five

(20) Number of children born to mother, including present birth Six
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*
 (22) I hereby certify that I attended the birth of this child, who was Born alive at 3:30 a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) Pauline F. McTeer R.N. #582
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Early Branch S.C.

Given name added from a supplemental report
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark) P. B. McTeer
 (27) Filed Sept 30 1916 (28) 4 B McTeer Local Registrar.
 19 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.

STATE OF SOUTH CAROLINA, COLUMBIA, S. C.