

(1) PLACE OF BIRTH

County of Greenville

Township of Greenville

or
Inc. Town of Poeville

or
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

46392

Registration District No. 2209 Registered No. 38

(For use of Local Registrar)

(2) Full Name of Child Claudie Matilda Chandler

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Jan. 18 1916</u>
<small>to be answered only in event of twins or triplets.</small>				<small>(Name of Month) (Day) (Year)</small>

FATHER.

(8) FULL NAME James Chandler

(9) PRESENT POSTOFFICE OF FATHER 217 Poeville Greenville SC

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE Jackson Ky

(13) OCCUPATION Engineer

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Daisy Ellena Clement

(15) PRESENT POSTOFFICE OF MOTHER 217 1/2 Poeville Greenville SC

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Years)

(18) BIRTHPLACE Greenville Co., S.C.

(19) OCCUPATION housewife

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 P M., on the date above stated. (Both live or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. J. Madley

(24) State whether Physician or Midwife (25) Address of Physician or Midwife physician Greenville, S.C.

Given name added from a supplemental report

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

(27) Filed Feb 3 1916 (28) A. J. Madley 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.

Registrar I Local Registrar

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

McCaw of Columbia

McCaw