

No. 1.

## (1) PLACE OF BIRTH

County of HayTownship of Simplex Act

Inc. Town of .....

City of .....

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Annas Verem

File No.—For State Registrar Only

90404

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 25094 Registered No. 180

(For use of Local Registrar)

(No. .... St.; .... Ward)

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 Dec 6, 1916

To be answered only in event of Twins or Triplets

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Joe Verem(9) PRESENT POSTOFFICE OF FATHER Long S C(10) COLOR OR RACE negro(11) AGE AT LAST BIRTHDAY 20 (Years)(12) BIRTHPLACE Hay County S.C.(13) OCCUPATION Farm Laborer(14) NAME BEFORE MARRIAGE Sarah Clarinda(15) PRESENT POSTOFFICE OF MOTHER Long S C(16) COLOR OR RACE negro(17) AGE AT LAST BIRTHDAY 20 (Years)(18) BIRTHPLACE Hay County, S.C.(19) OCCUPATION Farm Laborer(20) Number of children born to mother, including present birth 7(21) Number of children of this mother now living, including present birth 6

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 8 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Annie Bell(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Long's S.C.

Given name added from a supplemental report

(26) Witness Joe Verem

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

(27) Filed Dec 15, 1916 (28) J. N. Bryant 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.