

## (1) PLACE OF BIRTH

County of ClarendonTownship of Manning

Inc. Town of .....

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

76447

Registration District No. 1307 Registered No. 71

(For use of Local Registrar)

(2) Full Name of Child Marie Vinnie Ard { 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>Sept. 25, 1916</u>
To be answered only in event of Twins or Triplets				(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Thomas Franklin Ard(9) PRESENT POSTOFFICE OF FATHER Bloomville, S. C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 21 (Years)(12) BIRTHPLACE Clarendon Co. S. C.(13) OCCUPATION Lumber Mill(20) Number of children born to mother, including present birth { Two }

## MOTHER.

(14) NAME BEFORE MARRIAGE Mary Ann Hodge(15) PRESENT POSTOFFICE OF MOTHER Bloomville S. C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18 (Years)(18) BIRTHPLACE Clarendon Co. S. C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth { Two }

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 11 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Theresa Parson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Manning S. C.

Given name added from a supplemental report

(26) Witness A. J. Todd (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Oct. 4, 1916 (28) A. J. Todd 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.

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.  
McGaw, of Columbia.