

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 Adrian  
Township of Schultz  
or  
Inc. Town of North Augusta  
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  
**71066**

Registration District No. 2C Registered No. \_\_\_\_\_  
(For use of Local Registrar)

(2) Full Name of Child George Miller Butler 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 3 (6) Are Parents Married? yes (7) DATE OF BIRTH August 16, 1916  
(Name of Month) (Day) (Year)

FATHER  
(8) FULL NAME John R. Butler  
(9) PRESENT POSTOFFICE OF FATHER North Augusta  
(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 35 (Years)  
(12) BIRTHPLACE North Augusta  
(13) OCCUPATION Farmer

MOTHER  
(14) NAME BEFORE MARRIAGE Ruby Miller  
(15) PRESENT POSTOFFICE OF MOTHER North Augusta  
(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 32 (Years)  
(18) BIRTHPLACE Wentworth  
(19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 3 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 5 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Charles G. Sherman (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Sept 5, 1916 (28) A. L. Medlock 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.