

## (1) PLACE OF BIRTH

County of AndersonTownship of Andersonor  
Inc. Town of AndersonCity of Anderson

(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

42935

Registration District No. 22 A Registered No. 465

(For use of Local Registrar)

(2) Full Name of Child William Earn If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan 30 1916</u> (Name of Month) (Day) (Year)
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## FATHER.

(8) FULL NAME Elam Earn

(9) PRESENT POSTOFFICE OF FATHER Anderson

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE North Carolina

(13) OCCUPATION Farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE Robert T. Earn

(15) PRESENT POSTOFFICE OF MOTHER Anderson

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 24 (Years)

(18) BIRTHPLACE North Carolina

(19) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1

(21) Number of children of this mother now living, including present birth 1

## 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 P. M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. S. Smith(24) State whether Physician or Midwife (25) Address of Physician or Midwife 7. 1st St. Anderson

Given name added from a supplemental report

James S. Earn 1916

Super Registrar

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

(27) Filed Dec 17 1916 (28) J. S. Smith 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.

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