

Form No. 1

(1) PLACE OF BIRTH

County of Lexington
 Township of 3rd
 or
 Inc. Town of
 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

46849

(2) Full Name of Child Myrtle Christine Demick (If child is not yet named, make supplemental report as directed)

(3) ~~BOY OR~~ GIRL? (4) Twin or Triplet? (5) Number in order of birth 1st (6) Are Married? (7) DATE OF BIRTH Jan 23 1916
 To be answered only in event of twins or triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Royal Demick
 (9) PRESENT POSTOFFICE OF FATHER Columbia, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)
 (12) BIRTHPLACE Lexington Co., S.C.
 (13) OCCUPATION Farming
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Marie Koon
 (15) PRESENT POSTOFFICE OF MOTHER Columbia, S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)
 (18) BIRTHPLACE Lexington Co., S.C.
 (19) OCCUPATION Domestic
 (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 (Born alive or stillborn) (Hour A. M. or P. M.)
 on the date above stated.

(23) (Signature) R. E. Thompson (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

9/10 1916
Demick
 Registrar

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

(27) Filed 191... (28) R. E. Thompson 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.

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

Caw. of Columbia.

MADE BY THE BUREAU OF VITAL STATISTICS, U. S. DEPARTMENT OF COMMERCE