

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

91833

## (1) PLACE OF BIRTH

County of SpartanburgTownship of Cherokeeor  
Inc. Town of Xor  
City of XRegistration District No. .... Registered No. 267

(For use of Local Registrar)

St.; ..... Ward)

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

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>X</u>	(5) Number in order of birth <u>6</u> <small>To be answered only in event of Twins or Triplets</small>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec 21, 1916</u> <small>(Name of Month) (Day) (Year)</small>
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## FATHER.

## MOTHER.

(8) FULL NAME Joe Dickers(14) NAME BEFORE MARRIAGE Carrie Lawson(9) PRESENT POSTOFFICE OF FATHER Cherokee - S.C. R#3(15) PRESENT POSTOFFICE OF MOTHER Cherokee - S.C. R#3(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 39 (Years)(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 38 (Years)(12) BIRTHPLACE South Carolina(18) BIRTHPLACE South Car.(13) OCCUPATION Farming(19) OCCUPATION House work(20) Number of children born to mother, including present birth Six(21) Number of children of this mother now living, including present birth Six

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at Barnwell 4 P. M., on the date above stated. (Hour A. M. or P. M.)(23) (Signature) J. D. Cash(24) State of South Carolina (25) Address of Physician or Midwife Cherokee - S.C.

Given name added from a supplemental report

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

(27) Filed Dec 25, 1916 (28) J. B. Blockman 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.

Only

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