

(1) PLACE OF BIRTH

County of Macon

Township of

or
Inc. Town of

or
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
46813

(2) Full Name of Child Alice Lillian Goddard } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? no (5) Number in order of birth 11 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 20 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME D.P. Goddard

(9) PRESENT POSTOFFICE OF FATHER Bennettsville SC

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 45 (Years)

(12) BIRTHPLACE Darlington Co SC

(13) OCCUPATION Black Smith

(20) Number of children born to mother, including present birth 11

MOTHER.

(14) NAME BEFORE MARRIAGE Alice Byrd

(15) PRESENT POSTOFFICE OF MOTHER Bennettsville SC

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 42 (Years)

(18) BIRTHPLACE Darlington Co SC

(19) OCCUPATION House wife

(21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 8 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. F. Trammey

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

Given name added from a supplemental report

..... 191.....

..... Registrar

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

(27) Filed Jan 26 191..... (28) W. W. Pate 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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WHITE CARDS HAVE SERIALS AND ARE USED IN A SEPARATE REPORT.
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.