

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 Richland
Township of Center
or
Inc. Town of
or
City of (No. St.; Word)
(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
91589

Registration District No. 3801 Registered No.
(For use of Local Registrar)

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

(3) Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? (7) DATE OF BIRTH Dec 29, 1916
(Name of Month) (Day) (Year)

To be answered only in case of Twins or Triplets

FATHER.

(8) FULL NAME Jesse Cunningham
(9) PRESENT POSTOFFICE OF FATHER Deatsville S.C.
(10) COLOR OR RACE Caucasian (11) AGE AT LAST BIRTHDAY 40 (Years)
(12) BIRTHPLACE Lancaster S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth { 6

MOTHER.

(14) NAME BEFORE MARRIAGE Lizzie Fair
(15) PRESENT POSTOFFICE OF MOTHER Deatsville S.C.
(16) COLOR OR RACE Caucasian (17) AGE AT LAST BIRTHDAY 25 (Years)
(18) BIRTHPLACE William S.C.
(19) OCCUPATION
(21) Number of children of this mother now living, including present birth { 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 9:00 P.M. on the date above stated. (Hour A. M. or P. M.)
(23) (Signature) M. J. Williams
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Deatsville S.C.
(26) Witness Wm. D. St.
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 1916 (28) Local Registrar

Given name added from a supplemental report
....., 191.....
..... 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.