

FORM NO. 7. MARGIN RESERVED FOR BINDIN G. 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. McCaw, of Columbia.

(1) PLACE OF BIRTH  
County of Aiken  
Township of Sumner  
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  
**75463**

(2) Full Name of Child Lester Wayne Meyer } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug. 20, 1916  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Wayne Meyer  
(9) PRESENT POSTOFFICE OF FATHER Johnston S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)  
(12) BIRTHPLACE Aiken S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 6

MOTHER.  
(14) NAME BEFORE MARRIAGE Acacia Sawyer  
(15) PRESENT POSTOFFICE OF MOTHER Johnston S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34 (Years)  
(18) BIRTHPLACE Aiken S.C.  
(19) OCCUPATION House wife  
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*  
(22) I hereby certify that I attended the birth of this child, who was Alive at 2 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)  
(23) (Signature) P. A. Burman  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Ridge Spring S.C.

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 Oct 5, 1916 (28) A. E. Darity 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.