

THIS FORM IS PREPARED FOR THE STATE OF SOUTH CAROLINA. IT IS TO BE USED IN THE REGISTRATION OF BIRTHS. IT IS TO BE FILLED OUT BY THE REGISTRAR OR BY THE FATHER OR MOTHER OF THE CHILD. IT IS TO BE FILED IN THE REGISTRY OF BIRTHS. IT IS TO BE KEPT IN THE REGISTRY OF BIRTHS. IT IS TO BE KEPT IN THE REGISTRY OF BIRTHS.

(1) PLACE OF BIRTH

County of Charleston
 Township of Charleston
 or
 Inc. Town of Charleston
 or
 City of Charleston
 (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

66162

Registration District No. 40-a Registered No. 251
 (For use of Local Registrar)

(2) Full Name of Child... Baby M. S. Kissick

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 29 1916
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME William McKissick
 (9) PRESENT POSTOFFICE OF FATHER City
 (10) COLOR OR RACE C (11) AGE AT LAST BIRTHDAY 23 (Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Laboren
 (14) Number of children born to mother, including present birth 1

MOTHER.
 (14) NAME BEFORE MARRIAGE Gerty Lee Foster
 (15) PRESENT POSTOFFICE OF MOTHER City
 (16) COLOR OR RACE C (17) AGE AT LAST BIRTHDAY 19 (Years)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife
 (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 Alive at 10-a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. Taylor
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Charleston, 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 July 1 1916 (28) Jas Copes 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.

fifth month of pregnancy.

fifth month of pregnancy.