

Form No. 1

(1) PLACE OF BIRTH
 County of Edgefield
 Township of Rebut
 or
 Inc. Town of
 or
 City of (No. St.; Ward)

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

64194

Registration District No. 1815 Registered No. 81
 (For use of Local Registrar)

(2) Full Name of Child Joseph David Reighs { 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? (7) DATE OF BIRTH June 29 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Rebut David Reighs
 (9) PRESENT POSTOFFICE OF FATHER Plum Branch
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)
 (12) BIRTHPLACE Edgefield Co
 (13) OCCUPATION Farming
 (20) Number of children born to mother, including present birth Six

MOTHER.

(14) NAME BEFORE MARRIAGE Berta Reynolds
 (15) PRESENT POSTOFFICE OF MOTHER Plum Branch
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31 (Years)
 (18) BIRTHPLACE Edgefield Co
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth Four

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at Rebut June 29 P.M., on the date above stated. (Hour, A. M. or P. M.)

(23) (Signature) R. M. Pullen M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician | The Courches

Given name added from a supplemental report

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

(27) Filed June 1916 (28) J. S. Hughey 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.

NATIVITY REGISTRATION FORM—THIS IS A PERMANENT RECORD. WRITE PLAINLY, WITH UNFADING INK—THIS IS A SEPARATE BLANK FOR EACH CHILD, AND MARK THE 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.

City of Columbia