

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.
McGraw-Hill of Columbia

(1) PLACE OF BIRTH

County of Laurens

Township of Young's

Inc. Town of Cummings S.C.

City of (No.)

(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

46736

Registration District No. 2908 Registered No. (For use of Local Registrar)

(2) Full Name of Child Everline Moon

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

(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth

(To be answered only in case of Twins or Triplets)

(6) Are Parents Married? yes

(7) DATE OF BIRTH Jan. 3rd, 1915
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Martin Moon

(9) PRESENT POSTOFFICE OF FATHER Cummings S.C.

(10) COLOR OR RACE Colored

(11) AGE AT LAST BIRTHDAY 43 (Years)

(12) BIRTHPLACE Sharlensburg County

(13) OCCUPATION Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Everline Hilland

(15) PRESENT POSTOFFICE OF MOTHER Cummings S.C.

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 39 (Years)

(18) BIRTHPLACE Laurens County

(19) OCCUPATION House wife

(21) Number of children of this mother now living, including present birth 11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 4 A.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) W. J. Farmer M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Cummings S.C.

Given name added from a supplemental report

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

(27) Filed 191 (28) Local Registrar W. J. Farmer

*When there was no attending physician or midwife, then the father, householder, etc., should make this report as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.