

## (1) PLACE OF BIRTH

County of SpokaneTownship of Cheney

Inc. Town of

City of

(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

Registration District No. 2204Registered No. 8  
(For use of Local Registrar)(2) Full Name of Child Helvie Melvud Long(3) BOY OR GIRL Girl(4) Twin or Triplet? —(5) Number in order of birth 1(6) Are Parents Married? Yes

(7) DATE OF BIRTH

(Name of Month) (Day) (Year) Feb. 28, 1911

(8) FULL NAME

L.B. Long.

(9) PRESENT POSTOFFICE OF FATHER

Greer Co

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

36

(12) BIRTHPLACE

SC

(13) OCCUPATION

Farmer(14) Number of children born to mother, including present birth 1

(14) NAME BEFORE MARRIAGE

MOTHER.

Essie Cunningham

(15) PRESENT POSTOFFICE OF MOTHER

Greer Co

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

20

(18) BIRTHPLACE

SC

(19) OCCUPATION

Domestic(20) 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 born at 8:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed 3-7-11(28) J. H. James

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. 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.

FORM NO. 1  
WHEN NO ATTENDING PHYSICIAN OR MIDWIFE IS AVAILABLE, 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.