

(1) PLACE OF BIRTH

County of *Williamburg*Township of *King, No. 16*

or

Inc. Town of *Kingstree*

or

City of *Kingstree, S.C.* (No. *N.E. Main*

(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

79604

Registered No. *2.1*

(For use of Local Registrar)

(2) Full Name of Child *Lucile Cooper*

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

(3) BOY OR GIRL

girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

5th

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH *Aug. 23, 1916*
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

John Cooper

(9) PRESENT POSTOFFICE OF FATHER

Kingstree, S.C.

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

40
(Years)

(12) BIRTHPLACE

Indiantown, S.C.

(13) OCCUPATION

Farming work

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

Five

MOTHER.

(14) NAME BEFORE MARRIAGE

Nellie Montgomer

(15) PRESENT POSTOFFICE OF MOTHER

Kingstree, S.C.

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

31
(Years)

(18) BIRTHPLACE

Indiantown section

(19) OCCUPATION

Washerwoman

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

Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *born alive* at *6:15 P.M.*, on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)*Nellie Kenned* (23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

(c) was the *Midwife*,
Given name added from a supplemental report*Kingstree, S.C.*

(26) Witness

Isaac Singletary
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed *Sept. 1, 1916*(28) *J. S. McIntosh*
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.