

MARGIN RESERVED FOR BINDING.

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 McCaw of Columbia. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH
 County of Wilmington
 Township of Indian
 or
 Inc. Town of Registration District No. 4313
 or
 City of (No. St. Ward)
 (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
75105

Registered No. 64
 (For use of Local Registrar)

(2) Full Name of Child Henry Otis Cooper } If child is not yet named, make supplemental report as directed

(3) SON OR GIRL?	(4) Twin or Triplet? <small>To be answered only in event of Twins or Triplets</small>	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH <u>Aug 5, 1914</u> <small>(Name of Month) (Day) (Year)</small>
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FATHER.

(8) FULL NAME Walter Cooper

(9) PRESENT POSTOFFICE OF FATHER Cooper

(10) COLOR OR RACE B

(11) AGE AT LAST BIRTHDAY 25
(Years)

(12) BIRTHPLACE Sc

(13) OCCUPATION farm hand

(20) Number of children born to mother, including present birth } 3

MOTHER.

(14) NAME BEFORE MARRIAGE Ann Thompson

(15) PRESENT POSTOFFICE OF MOTHER Cooper

(16) COLOR OR RACE B

(17) AGE AT LAST BIRTHDAY 23
(Years)

(18) BIRTHPLACE Sc

(19) OCCUPATION Home Wife

(21) Number of children of this mother now living, including present birth } 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Albert Cooper
(24) State whether Physician or Midwife Midwife **(25) Address of Physician or Midwife**

Given name added from a supplemental report
 191.....

 Registrar

(26) Witness Walter Cooper
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Aug 5, 1914 **(28)** Cooper
 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.