

(1) PLACE OF BIRTH  
 County of CHEROKEE  
 Township of CHEROKEE  
 or  
 Inc. Town of .....  
 or  
 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—  
**48453**

Registration District No. 1000-A Registered No. 13  
 (For use of Local Registrar)

(2) Full Name of Child Largest Ann. White { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 3 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 27  
 (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Robt. White  
 (9) PRESENT POSTOFFICE OF FATHER Grover, N.C. 201  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 17 3  
 (Years)  
 (12) BIRTHPLACE Cherokee  
 (13) OCCUPATION Farmer  
 (14) Number of children born to mother, including present birth { 4

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Mary Ann Blanton  
 (15) PRESENT POSTOFFICE OF MOTHER Grover, N.C. 201  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 36  
 (Years)  
 (18) BIRTHPLACE Clayland Co. N.C.  
 (19) OCCUPATION Wife  
 (20) Number of children of this mother now living, including present birth { 3

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

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

(22) (Signature) Jas. M. Carpenter  
 (23) State whether Physician or Midwife (24) Address of Physician or Midwife  
Blacksburg, N.C.

Give name added from a supplemental report

(25) Witness .....  
 (Signature of Witness necessary only when question 22 is signed by mark.)

(26) Filed Feb. 30 1930 (27) 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.