

(1) PLACE OF BIRTH

County of BeaufortTownship of Wilmington

or

Inc. Town of Wilmington

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

31552

Registration District No. Registered No. 61

(For use of Local Registrar)

Only

(2) Full Name of Child Marianne Darlington If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Girl

(4) Twin or Triplet?

(If answered only in case of Twin or Triplets)

(5) Number in order of birth

(6) Are Parents Married? Yes(7) DATE OF BIRTH Sept 30

(Name of Month) (Day) (Year)

Ward)

make

cted

FATHER.

(8) FULL NAME David Darin Jeffers(9) PRESENT POSTOFFICE OF FATHER West Union(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 42 (Years)(12) BIRTHPLACE Luxington Co S.C.(13) OCCUPATION Preacher(14) Number of children born to mother, including present birth 8

MOTHER.

(14) NAME BEFORE MARRIAGE Lottie Croun(15) PRESENT POSTOFFICE OF MOTHER West Union S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 33 (Years)(18) BIRTHPLACE Luxington Co S.C.(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) John H. McKelvey(24) State whether Physician or Midwife (25) Address of Physician or Midwife West Union

Given name added from a supplemental report

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

(27) Filed Oct 9 1917 (28) R. G. Williams 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.

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