

**CERTIFICATE OF BIRTH**

(1) PLACE OF BIRTH  
 County of Cass STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 Township of Bull Creek State Board of Health

File No. 84413 For State Registrar Only  
 (For use of Local Registrar)

Inc. Town of ..... Registration District No. 205 Registered No. 79  
 or  
 City of ..... (No. .... St.; ..... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mohara Kelley } 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 1  
To be answered only in event of Twins or Triplets (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov 1 1916  
(Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Erwin Kelley  
 (9) PRESENT POSTOFFICE OF FATHER Sumner S.C.  
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 20  
(Years)  
 (12) BIRTHPLACE Appleton S.C.  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 1

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Lillie Belle Daniels  
 (15) PRESENT POSTOFFICE OF MOTHER Sumner S.C.  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 18  
(Years)  
 (18) BIRTHPLACE Sumner S.C.  
 (19) OCCUPATION Farmer's wife  
 (21) 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 9 P M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Billy Saxon  
 (24) State whether Physician or Midwife mid wife (25) Address of Physician or Midwife Sumner S.C.

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

(26) Witness M. D. Prout  
(Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed Nov 6 1916 (28) J. A. Rouss  
 Local Registrar

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE REPORT FOR EACH CHILD, and mark FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5. McCaw, of Columbia.

\*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.