

1. In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 2.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		The No.—For State Registrar Only	
County of <u>Dorchester</u>		STATE OF SOUTH CAROLINA		34377	
Township of <u>Jefferson</u>		Bureau of Vital Statistics			
or Inc. Town of .....		State Board of Health			
City of .....		Registration District No. <u>2024</u>		Registered No. <u>61</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. ....) (Sec. ....) (Ward ....)		(For use of Local Registrar)	
(2) Full Name of Child <u>Germa MacArthur</u> child is not yet named, make supplemental report as directed					
(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet <u>1st</u>	(5) Number in order of birth <u>2nd</u>	(6) Age Parents married <u>2</u>	(7) DATE OF BIRTH <u>July 22</u>	
FATHER.			MOTHER.		
(8) FULL NAME <u>Charles A. MacArthur</u>			(14) NAME BEFORE MARRIAGE <u>Edith Leaden</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Trimmorsville, Mo.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Trimmorsville, Mo.</u>		
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>23</u>	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>25</u>		
(12) BIRTHPLACE <u>Trimmorsville, Mo.</u>			(18) BIRTHPLACE <u>Darlington, S.C.</u>		
(19) OCCUPATION <u>Farmer</u>			(20) OCCUPATION <u>Housekeeper</u>		
(21) Number of children born to mother, including present birth <u>4</u>			(22) Number of children of this mother now living, including present birth <u>3</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(23) I hereby certify that I attended the birth of this child, who was <u>born alive or stillborn</u> on the date above stated. (Hour A. M. or P. M.) <u>12:30 P.M.</u>					
(24) (Signature) <u>W. E. MacArthur</u> (State whether Physician or Midwife) <u>Physician</u> (Address of Physician or Midwife) <u>Trimmorsville, Mo.</u>					
Give name added from a supplemental report			(25) Witness (Signature of Witness necessary only when question 23 is signed by mark) <u>W. E. MacArthur</u>		
(26) <u>18</u> Registrar			(27) <u>Nov 5-22-19</u> 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.