

(1) PLACE OF BIRTH

County of Mallory
 Township of Bennettsville
 or
 Inc. Town of.....
 or
 City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

31286

Registration District No. 3311 Registered No. 127
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Fannie May McKinnon

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 27 1917
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Fannie McKinnon
 (9) PRESENT POSTOFFICE OF FATHER Bennettsville, S.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 29
 (Years)

(12) BIRTHPLACE Mallory Co. S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 13

MOTHER.

(14) NAME BEFORE MARRIAGE Joe Ma. Wilson

(15) PRESENT POSTOFFICE OF MOTHER Bennettsville, S.C.

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 24
 (Years)

(18) BIRTHPLACE Mallory, C. S.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 13

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 3 9 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Hate M. Lucas

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Bennettsville, S.C.

Given name added from a supplemental report

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

(27) Sept 27 1917 (28) Mar 27 1918
 Registrar 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.