

(1) PLACE OF BIRTH

County of Kershaw

Township of .....

or

Inc. Town of .....

or

City of Caulden

(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

90444

Registration District No. 27-A Registered No. 81

(For use of Local Registrar)

(2) Full Name of Child Margaret Bylesby Pitts { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Girl(4) Twin or Triplet? No

To be answered only in case of Twins or Triplets

(5) Number in order of birth 4(6) Are Parents Married? Yes(7) DATE OF BIRTH Dec, 19, 1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Reuben B. Pitts(9) PRESENT POSTOFFICE OF FATHER Caulden(10) COLOR OR RACE W(11) AGE AT LAST BIRTHDAY 34 (Years)(12) BIRTHPLACE Lancaster SC(13) OCCUPATION Mill President(20) Number of children born to mother, including present birth { 4 }

## MOTHER.

(14) NAME BEFORE MARRIAGE Margaret Post(15) PRESENT POSTOFFICE OF MOTHER Caulden(16) COLOR OR RACE W(17) AGE AT LAST BIRTHDAY 27 (Years)(18) BIRTHPLACE Oceanfront Pa

(19) OCCUPATION

(21) Number of children of this mother now living, including present birth { 3 }

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 7 P.M., on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) J. W. Cornish

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed Dec 19 1916

(28)

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.

McN.W. of Columbia. FIRST-BORN N. No. 1. THE OTHER, No. 2, etc., in question 5. MARK the