

MARGIN-RESERVED FOR BENDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—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 5.
McCaiv, of Columbia.

(1) PLACE OF BIRTH **Laurens**
 County of **Laurens**
 Township of **Jacks**
 or
 Inc. Town of
 or
 City of (No. St.; Ward)
 (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—
77878

Registration District No. **2903** Registered No. **39**
 (For use of Local Registrar)

(2) Full Name of Child **Wellie Bell Copeland** If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy	(4) Twin or Triplet? To be answered only in case of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? yes	(7) DATE OF BIRTH Aug. 3 1914 (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME Eugene Copeland	(14) NAME BEFORE MARRIAGE Banner Kinard			
(9) PRESENT POSTOFFICE OF FATHER Clinton SC	(15) PRESENT POSTOFFICE OF MOTHER Clinton SC			
(10) COLOR OR RACE Black	(11) AGE AT LAST BIRTHDAY 23 (Years)	(16) COLOR OR RACE Black	(17) AGE AT LAST BIRTHDAY 24 (Years)	
(12) BIRTHPLACE SC Farm hand	(18) BIRTHPLACE SC			
(13) OCCUPATION Farm hand	(19) OCCUPATION Farm hand			
(20) Number of children born to mother, including present birth 4	(21) Number of children of this mother now living, including present birth 4			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) **Meese Jones**
 (24) State whether Physician or Midwife **Midwife** (25) Address of Physician or Midwife **Clinton SC**

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

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed **Sept 4 1914** (28) **D. H. Copeland** 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.