

MARGIN RESERVED FOR BINDING.
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.

(1) PLACE OF BIRTH
 County of Sumter
 Township of
 or
 Inc. Town of Maysville
 or
 City of
 (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
83637

Registration District No. 4102 Registered No. 173
 (For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child Mose Franklin Fulwood If child is not yet named, make supplemental report as directed.

(3) BOY OR GIRL boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Oct 21 1916
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jahar Fulwood
 (9) PRESENT POSTOFFICE OF FATHER Maysville
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 26
 (Years)
 (12) BIRTHPLACE Chiloh
 (13) OCCUPATION Farming
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Lillie Echols
 (15) PRESENT POSTOFFICE OF MOTHER Maysville
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 29
 (Years)
 (18) BIRTHPLACE Lanora
 (19) OCCUPATION Farming
 (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 ... Oliver ... at 10 a. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) B. W. ...
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Maysville, S.C.

Given name added from a supplemental report
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Oct 28 1916 (28) W. J. ... 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.

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