

FORM NO. 2. MARRIAGE RECORDS AND BIRTH RECORDS. WITH UNFOLDING TABS—FILLS IN 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 Lenoir
 Township of Lenoir
 or
 Inc. Town of Lenoir Registration District No. 42-A Registered No. 31
 (For use of Local Registrar)
 City of Lenoir (No. 1 St. 3 Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (2) Full Name of Child Bill Pullesary { If child is not yet named, make supplemental report as directed

File No.—For State Registrar Only
53954

(3) BOY OR GIRL? Boy (4) Twin or triplet? No (5) Number in order of birth 1
To be answered only in event of Twins or Triplets (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 6 1916
(Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Charlie Pullesary
 (9) PRESENT POSTOFFICE OF FATHER Lenoir, S.C.
 (10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 36 (Years)
 (12) BIRTHPLACE Greece
 (13) OCCUPATION proprietor cafe
 (20) Number of children born to mother, including present birth 2

MOTHER.
 (14) NAME BEFORE MARRIAGE Andromiki Psillos
 (15) PRESENT POSTOFFICE OF MOTHER Lenoir, S.C.
 (16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 29 (Years)
 (18) BIRTHPLACE Greece
 (19) OCCUPATION House wife
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11 a. m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) Robt. R. Perry, M.D.
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Lenoir, S.C.

Given name added from a supplemental report
Nov 3 1916
C. W. Sarratt
Scripps Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
mech 13 1916 (27) Filed S. G. Sarratt 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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