

Form No. 1

## (1) PLACE OF BIRTH

County of Malboro  
 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

39397

Registration District No. 3301 Registered No. 164  
 (For use of Local Registrar)

City of..... (No. .... St.; .... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Roy Witherspoon { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov 19 1914  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Suppet Witherspoon(9) PRESENT POSTOFFICE OF FATHER Bennettsville, S.C.(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 37  
 (Years)(12) BIRTHPLACE Malboro, Co. S.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 4

## MOTHER.

(15) NAME BEFORE MARRIAGE Cornelia Witherspoon(16) PRESENT POSTOFFICE OF MOTHER Bennettsville, S.C.(17) COLOR OR RACE Colored (18) AGE AT LAST BIRTHDAY 34  
 (Years)(19) BIRTHPLACE Malboro, Co. S.C.(20) OCCUPATION Housewife(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 Alive at 7 AM  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Deana Seal  
 (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) Nov 27 1914 (28) Mrs. J. W. Tate  
 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.