

IN THE STATE OF SOUTH CAROLINA, COUNTY OF LAURENS, S. C.
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 6.

(1) PLACE OF BIRTH

County of Laurens
Township of Scuppernon
or
Inc. Town of
or
City of

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

Registration District No. 2905 Registered No. 94
(For use of Local Registrar)

File No.—For State Registrar Only

90649

(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 Jimmie Little (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH Dec 10 1916
(Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME		(14) NAME BEFORE MARRIAGE	<u>Etta Fay Little</u>
(9) PRESENT POSTOFFICE OF FATHER		(15) PRESENT POSTOFFICE OF MOTHER	<u>Laurens, S.C. R 2</u>
(10) COLOR OR RACE	(11) AGE AT LAST BIRTHDAY (Years)	(16) COLOR OR RACE	<u>Negro</u> (17) AGE AT LAST BIRTHDAY (Years) <u>15</u>
(12) BIRTHPLACE		(18) BIRTHPLACE	<u>Laurens Co. S.C.</u>
(13) OCCUPATION		(19) OCCUPATION	<u>Farm laborer</u>
(20) Number of children born to mother, including present birth		(21) Number of children of this mother now living, including present birth	<u>1</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
(22) I hereby certify that I attended the birth of this child, who was born alive at 7 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Babe x Craig
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Laurens, S.C.
Given name added from a supplemental report
(26) Witness Blanche Dorman
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Dec 11 1916 (28) F. L. Dorman 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.

