

(1) PLACE OF BIRTH

County of Starbuck
Township of Wahpet
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
50544

Registration District No. 4010 Registered No. 5
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.) St.; Ward)

(2) Full Name of Child

If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD <u>Boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Feb. 27</u>
FATHER.			MOTHER.	

(8) FULL NAME OF FATHER Don't know

(14) NAME BEFORE MARRIAGE Leggie Hall

(9) PRESENT POSTOFFICE OF FATHER

(15) PRESENT POSTOFFICE OF MOTHER Pauline #1

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY (Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY (Years) 21

(12) BIRTHPLACE

(18) BIRTHPLACE

(13) OCCUPATION

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 3

(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 alive at 7 AM on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Andrew Pauline #1

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Pauline #1

Given name added from a supplemental report
..... 181
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Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by clerk)

(27) Filed Feb 28 1916 (28) 31 Fred Newman Local Registrar

MARGIN RESERVED FOR BINDING.
WHITE 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 3.

*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.