

(1) PLACE OF BIRTH

County of SpauldingTownship of Spauldingor  
Inc. Town ofor  
City of Cause SC

(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  
91893Registration District No. 4008 Registered No. 760  
(For use of Local Registrar)(2) Full Name of Child Mary Louise Cash { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Y (4) Twin or Triplet? 1 (5) Number in order of birth 5 (6) Are Parents Married? Yes (7) DATE OF BIRTH 12 5 6  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Cash Cash(9) PRESENT POSTOFFICE OF FATHER Cause SC(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 40 (Years)(12) BIRTHPLACE SC(13) OCCUPATION Mill Work(20) Number of children born to mother, including present birth Five

## MOTHER.

(14) NAME BEFORE MARRIAGE Maudie Seamon(15) PRESENT POSTOFFICE OF MOTHER Cause SC(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 29 (Years)(18) BIRTHPLACE SC(19) OCCUPATION NW(21) Number of children of this mother now living, including present birth Five

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born at 10 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Arthur E. Cannon

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Cause SC

Given name added from a supplemental report

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Registrar

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

(27) Filed Dec 16 1914 (28) E. F. Parker 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.

fifth month of pregnancy.

FIRST-BORN. No. 1. THIS OFFICE, No. 2, etc., in question 5.

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