

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

File No. — For State Registrar Only
66237

(1) PLACE OF BIRTH

County of SpartanburgTownship of Cherokee

Inc. Town of

City of

Registration District No. W002BRegistered No. 169
 (For use of Local Registrar)

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

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

(3) BOY OR GIRL? <u>girl</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>June, 2, 1906</u> (Name of Month) (Day) (Year)
------------------------------	--------------------------------	---------------------------------------	-------------------------------------	--

FATHER.

(8) FULL NAME Rose Lawrence(9) PRESENT POSTOFFICE OF FATHER Cherokee S.C. R2(10) COLOR OR RACE Caucasian (11) AGE AT LAST BIRTHDAY 25
(Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Anna Moore(15) PRESENT POSTOFFICE OF MOTHER Cherokee S.C.(16) COLOR OR RACE Caucasian (17) AGE AT LAST BIRTHDAY 20
(Years)(18) BIRTHPLACE S.C.(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 1 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Mary Moore(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Cherokee S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed July 10, 1906 (28) W. W. Rutherford
 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.

MARRIAGE REGISTERED FOR BUNDLING. THIS IS A PERMANENT RECORD. WRITING PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. N. H.—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. McCaw, of Columbia.