

THIS IS A PRELIMINARY RECORD. IT IS NOT TO BE USED FOR TRIPLETTS OR TWINS OR FIRST-BORN. No. 1. THE OTHER, No. 2, etc. In question 4.

(1) PLACE OF BIRTH  
County of Farmers  
City of Dials  
Inc. Town of .....  
or  
City of .....  
(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

4131

Registration District No. 2901 Registered No. 135  
(For use of Local Registrar)

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

(3) SEX OR MALE (4) Twin or Triplet 7 (5) Number in order of birth 2 (6) Age Ys (7) DATE OF BIRTH 10/10/13  
To be answered only in case of Twin or Triplet

FATHER  
(8) FULL NAME Billy Doster  
(9) PRESENT RESIDENCE OF FATHER Gray Court S.C.  
(10) COLOR OR RACE Blk (11) AGE AT LAST BIRTHDAY 36  
(12) BIRTHPLACE S.C.  
(13) OCCUPATION Farmer  
(14) Number of children born to mother, including present birth 1 2

MOTHER  
(15) NAME BEFORE MARRIAGE Jilly Mark  
(16) PRESENT RESIDENCE OF MOTHER Gray Court S.C.  
(17) COLOR OR RACE Blk (18) AGE AT LAST BIRTHDAY 26  
(19) BIRTHPLACE S.C.  
(20) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 1 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE  
(22) I hereby certify that I attended the birth of this child, who was Alive at H.A.M. on the date above stated. (Born Alive or stillborn) (Hour A. M. or P. M.)  
(23) (Signature) H. B. Stewart  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Mountain View S.C.  
Given name added from a supplemental report  
(26) Witness .....  
(27) Signed Jan 8 1914 (28) W. C. Mahon 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.