

(1) PLACE OF BIRTH
 County of Newberry
 Township of N.D. 10
 OR
 Inc. Town of
 OR
 City of (No. St.; Ward)
 (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
73994

Registration District No. 3401 Registered No. 30
 (For use of Local Registrar)

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

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Aug. 4, 1916</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Frank Elijah Shealy

(9) PRESENT POSTOFFICE OF FATHER Prosperity SC

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31 (Years)

(12) BIRTHPLACE Newberry Co SC

(13) OCCUPATION Lumber Mfg

(20) Number of children born to mother, including present birth 1.5

MOTHER.

(14) NAME BEFORE MARRIAGE Cher Lounie Sease

(15) PRESENT POSTOFFICE OF MOTHER Prosperity SC

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30 (Years)

(18) BIRTHPLACE Newberry Co. S. C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 1.5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 1:30 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. M. Sease M.D.

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

Given name added from a supplemental report
 191.....
 Registrar

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

(27) Filed Sept. 10, 1916 (28) W. A. Counts
 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.