

(1) PLACE OF BIRTH
 County of Spartanburg
 Township of
 Inc. Town of
 City of
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar Only
50385

Registration District No. 49-a Registered No. 69
 (For use of Local Registrar)
 St.: Ward:
 (If child is not yet named, make supplemental report as directed)

(2) Full Name of Child Marjorie Lee

(3) GIRL (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? (7) DATE OF BIRTH Feb. 4, 1911
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME P. R. Kennedy
 (9) PRESENT POSTOFFICE OF FATHER Spartanburg, SC
 (10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 30 (Years)
 (12) BIRTHPLACE Lowndesboro SC
 (13) OCCUPATION RR Clerk
 (20) Number of children born to mother, including present birth 4

MOTHER.
 (14) NAME BEFORE MARRIAGE Margus Green
 (15) PRESENT POSTOFFICE OF MOTHER Spartanburg SC
 (16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 30 (Years)
 (18) BIRTHPLACE Lowndesboro NC
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) P. R. Kennedy, M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Phys. Spartanburg, SC.

Given name added from a supplemental report 191.....
 Registrar
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Mich. 1911 (28) Jas. Cooper 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.

Registrar Local Registrar

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N. R.—In case of TWINS OR TRIPLETS use a SEPARATE FORM for each child, and question 5.

W. H. McCaw, of Columbia.

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