

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY. WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
N. B.—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 1.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>Corry</u> <u>Co</u>		STATE OF SOUTH CAROLINA		2606	
Township of <u>Porter</u>		Bureau of Vital Statistics			
Inc. Town of		State Board of Health			
City of		Registration District No. <u>104</u>		Registered No. <u>5</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. St.)		(For use of Local Registrar)	
(2) Full Name of Child <u>Rita White</u>		If child is not yet named, make supplemental report as directed			
(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet	(5) Number in order of birth	(6) Sex	(7) DATE OF BIRTH	
	To be answered only in case of Twin or Triplet			(Month) (Day) (Year)	
FATHER.			MOTHER.		
(8) FULL NAME	<u>Arthur White</u>		(14) NAME BEFORE MARRIAGE	<u>Emma Paul</u>	
(9) PRESENT RESIDENCE OF FATHER	<u>June St.</u>		(15) PRESENT RESIDENCE OF MOTHER	<u>June St.</u>	
(10) COLOR OR RACE	(11) AGE AT LAST BIRTHDAY	<u>35</u>	(16) COLOR OR RACE	(17) AGE AT LAST BIRTHDAY	<u>34</u>
(12) BIRTHPLACE	<u>Cherokee Co.</u>		(18) BIRTHPLACE	<u>Cherokee Co.</u>	
(13) OCCUPATION	<u>Miner</u>		(19) OCCUPATION	<u>Yolman</u>	
(20) Number of children born to mother, including present birth	<u>7</u>		(21) Number of children of this mother now living, including present birth	<u>7</u>	
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was <u>born alive</u> on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature)		<u>Emma X. Fisher</u>		(25) Address of Physician or Midwife	
(24) State whether Physician or Midwife		<u>Midwife</u>		<u>Cherokee Co.</u>	
Given name added from a supplemental report		(26) Witness		(27) Filed	
		(Signature of Witness necessary only when question 25 is signed by mark)		(28) <u>J. H. P. Thomas</u> 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.