

McCaw, of Columbia, S. C. WITHIN INCLOSED SPACE THEREIN. WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. No. 2, etc., in question 5. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH **CERTIFICATE OF BIRTH**
 County of Spartanburg STATE OF SOUTH CAROLINA.
 Township of Spartanburg Bureau of Vital Statistics
 or Blenheim State Board of Health
 City of _____ Registration District No. 4808 Registered No. 384
 (For use of Local Registrar)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only
44706

(2) Full Name of Child Willie May Angela Love Williams If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? _____ (5) Number in order of birth _____ (6) Are Parents Married? Yes (7) DATE BIRTH Dec 7 19 35
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Claude Augustus Reeves
 (9) PRESENT POSTOFFICE OF FATHER Sindenale SC
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 22 (Years)
 (12) BIRTHPLACE Laurens Co SC
 (13) OCCUPATION Versus Carter Mill
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Oude May Knight
 (15) PRESENT POSTOFFICE OF MOTHER Sindenale SC
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 19 (Years)
 (18) BIRTHPLACE Laurens Co SC
 (19) OCCUPATION Housewife
 (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 Love at 7:20 P. M.,
 on the date above stated. (Born alive or stillborn) (Hour) (A. M. or P. M.)
 (23) (Signature) William W. Smith
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report _____ (26) Witness _____
 5-12-1-143 191... (Signature of Witness necessary only when question 23 is signed by mark)
 M. B. Woodward (27) Filed Dec 15 191 5 (28) C. F. Parker
 Registrar 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.