

WRITING RECOMMENDED FOR WRITING.
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 5.

(1) PLACE OF BIRTH

County of Greenville

Township of Durham

OR
INC. TOWN of

OR
CITY of

CERTIFICATE OF BIRTH

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

File No. 56042 For Birth Registration

Registration District No. 2202

Registered No. 41
(For use of Local Registrar)

(2) Full Name of Child

Maudelie Lee

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? Yes (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH 4, 19
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME M. G. King
(9) PRESENT POSTOFFICE OF FATHER Greenville R 4
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Years)
(12) BIRTHPLACE Greenville S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth { 2

MOTHER

(14) NAME BEFORE MARRIAGE Marie Granger
(15) PRESENT POSTOFFICE OF MOTHER Greenville R 4
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)
(18) BIRTHPLACE Greenville S.C.
(19) OCCUPATION House Wife
(21) Number of children of this mother now living, including present birth { 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.) 6:30 P. M.

(23) (Signature) J. H. White, M.D.
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Greenville R 2

Given name added from a supplemental report

M. G. King 1st b.
Greenville
Farmer

(26) Witness (Signature of Witness necessary only when question 22 is signed by mother)
(27) Signed May 1, 1916 (28) J. H. White, M.D. Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.