

(1) PLACE OF BIRTH

County of Fairfield
 Township of X 9

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

64230

Inc. Town of Registration District No. 1908 Registered No. 45-
 City of (No. St. Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Jessie Lee Moore

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

(1) BOY OR GIRL? Girl (4) Twin or Triplet? X (5) Number in order of birth X (6) Are Parents Married? yes (7) DATE OF BIRTH June 8, 1914
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Thomas Moore(9) PRESENT POSTOFFICE OF FATHER Rion S.C.(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 36 (Years)(12) BIRTHPLACE Fairfield Co(13) OCCUPATION Public work(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Pearlie Turner(15) PRESENT POSTOFFICE OF MOTHER Rion S.C.(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 29 (Years)(18) BIRTHPLACE Fairfield Co(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 8/30 a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Elyse Moore

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

midwife Rockton S.C.

Given name added from a supplemental report

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

(27) Filed June 10, 1914 (28) D. E. Puff 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.

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 5.
 McCaw, of Columbia.