

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Spartanburg STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 Town-ship of Cherokee State Board of Health

File No.—For State Registrar Only

2488

In the town of Registration District No. 4002a Registered No. 17
 (For use of Local Registrar)

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

(4) Twin or triplet? (5) Number in order of birth 4
 to be answered only in case of twins or triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Jan 25, 1900
 (State of Month) (Day) (Year)

FATHER.

(8) NAME W. Davis

(9) PRESENT POSTOFFICE OF FATHER Cherokee, S.C.

(10) COLOR W (11) AGE AT LAST BIRTHDAY 40
 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Switchboard operator

(14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Sparks

(15) PRESENT POSTOFFICE OF MOTHER Cherokee, S.C.

(16) COLOR W (17) AGE AT LAST BIRTHDAY 34
 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housekeeping

(20) 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 Balmy at 5 A. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. E. McIntosh, M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Cherokee, 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 2/11/00 (28) J. Blockwell
 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.

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.