

No. 1.

## (1) PLACE OF BIRTH

County of Robeson  
 or  
 Township of Lower  
 or  
 Inc. Town of .....

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only  
 78981

Registration District No. 3.80.3 Registered No. 267  
 (For use of Local Registrar)

(2) Full Name of Child Fattie Scott (No. .... St.; ..... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

BOY OR GIRL  (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 28 1916  
 To be answered only in event of Twins or Triplets If child is not yet named, make supplemental report as directed  
 (Name of Month) (Day) (Year)

**FATHER.**  
 FULL NAME Leopold Scott  
 PRESENT POSTOFFICE OF FATHER Easton SC  
 COLOR OR RACE negr (11) AGE AT LAST BIRTHDAY 40  
 BIRTHPLACE SC  
 OCCUPATION Black Smith  
 Number of children born to mother, including present birth 7

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Mary Miller  
 (15) PRESENT POSTOFFICE OF MOTHER Easton  
 (16) COLOR OR RACE Went (17) AGE AT LAST BIRTHDAY 19  
 (18) BIRTHPLACE SC  
 (19) OCCUPATION Housewife  
 (21) 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 Alive at 11 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jane Murray  
 (24) State whether Midwife (25) Address of Physician or Midwife EASTON

Given name added from a supplemental report  
 .....

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

(27) Filed Aug 31 1916 (28) J. D. ... 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.