

(1) PLACE OF BIRTH
 County of Piedmont
 Township of
 or
 Inc. Town of
 or
 City of Lasley

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

File No.—For State Registrar Only
50200

Registration District No. 37 a Registered No. 9
 (For use of Local Registrar)

(2) Full Name of Child Madolena Dr. Alworth West } 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 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 5 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Wrightson W. West
 (9) PRESENT POSTOFFICE OF FATHER Lasley, S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 34 (Years)
 (12) BIRTHPLACE Durham N.C.
 (13) OCCUPATION School Teacher
 (20) Number of children born to mother, including present birth 1

MOTHER.
 (14) NAME BEFORE MARRIAGE May Belle Gooden
 (15) PRESENT POSTOFFICE OF MOTHER Lasley, S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 28 (Years)
 (18) BIRTHPLACE Anderson S.C.
 (19) OCCUPATION Homemaker
 (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 alive at 5:10 P. M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) C. A. Wyatt
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Lasley S.C.

Given name added from a supplemental report
 _____, 191...

 Registrar

(26) Witness _____ (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed July 8, 1916 (28) C. A. Wyatt 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.
 _____ Registrar I _____ Local Registrar.

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MARRIAGE REGISTRATION BOOK BINDING.
 WHITE 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.
 W. B. McCraw, of Columbia.
 W. B. McCraw, of Columbia.