

(1) PLACE OF BIRTH

County of W. BayTownship of John

Inc. Town of

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

87787

Registration District No. 4304 Registered No. 1518

(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Nov. 14</u> 191 <u>4</u>
				(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Weldon H. Evans(14) NAME BEFORE MARRIAGE Lilla M. Evans(9) PRESENT POSTOFFICE OF FATHER Excelsior 26(15) PRESENT POSTOFFICE OF MOTHER Excelsior 26(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 33 (Years)(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 32 (Years)(12) BIRTHPLACE S.C.(18) BIRTHPLACE S.C.(13) OCCUPATION Farm(19) OCCUPATION Housewife(20) Number of children born to mother, including present birth 4(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 1 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Mrs. S. Evans(24) State whether Physician or Midwife (25) Address of Physician or Midwife Excelsior 26

Given name added from a supplemental report

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

(27) Filed Dec. 12, 1914 (28) L. L. Asd. 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.