

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

49. 50

Full Name of Child *James*

St.; ..... Ward  
(street and number.)

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

(7) DATE OF BIRTH Feb 24 1906  
(Name of Month) (Day) (Year)

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

Answer.

(21) Number of children of this mother  
now living, including present birth

Horsehair

(24) State whether Physician or Midwife

(27) Filed

(28)

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

Local Registrar