FORM NO. 5.

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.

MARGIN RESERVED FOR BINDING.

(1) PLACE OF BIRTH

County of Georgetown

Township of No 5

or

Inc. Town of

or

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. 42905 — For State Registrar Only

Registration District No. 2104 Registered No. 67 (For use of Local Reistrar)

(No. ..... St.; ..... Ward)

(2) Full Name of Child ..... If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

(4) Twin or Triplet? To be answered only in event of Twins or Triplets

(5) Number in order of birth ✓

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Dec, 13, 1915 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Dooley Prevost

(9) PRESENT POSTOFFICE OF FATHER Hautesville

(10) COLOR OR RACE W

(11) AGE AT LAST BIRTHDAY 24 (Years)

(12) BIRTHPLACE Hautesville Region

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth ✓ 1

MOTHER.

(14) NAME BEFORE MARRIAGE Margaret Pauline Bush

(15) PRESENT POSTOFFICE OF MOTHER Dead

(16) COLOR OR RACE W

(17) AGE AT LAST BIRTHDAY [illegible] (Years)

(18) BIRTHPLACE Petersfield SC

(19) OCCUPATION Louise Wife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was delivered at 8 P. M., (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) S B Cecil M D

(24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife Hautesville SC

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 Dec 17 1915 (28) [illegible] 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.

Dupuy Registrar | ✓ | Local Registrar.

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McCaw, of Columbia.

McCaw, [illegible]