

9. N. E.—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.

County of Lee **CERTIFICATE OF BIRTH**
STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health
Township of Bishopville
or
Inc. Town of Registration District No. 2000 Registered No. 64
or
City of (No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only
65139

(2) Full Name of Child Fannie Lee Watson { If child is not yet named, make supplemental report as directed

(3) ~~BOY~~ OR GIRL? (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 24 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Henry Tillman Watson
(9) PRESENT POSTOFFICE OF FATHER Bishopville S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 36 (Years)
(12) BIRTHPLACE Lee Co
(13) OCCUPATION Fanner
(20) Number of children born to mother, including present birth { 5

MOTHER.

(14) NAME BEFORE MARRIAGE Winnie Garret
(15) PRESENT POSTOFFICE OF MOTHER Bishopville S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Years)
(18) BIRTHPLACE Lee Co
(19) OCCUPATION Home Duties
(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 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Eliza Williams
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Bishopville S.C.

Given name added from a supplemental report

(26) Witness Mrs. N. J. Laney
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed June 1 1916 (28) Mrs. N. J. Laney 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.

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