

FORM NO. 5
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 N. No. 1, THE OTHER, No. 2, etc., in question 5.
N. B. McCraw, of Columbia

(1) PLACE OF BIRTH

County of Greenville
Township of Paris wh

or
Inc. Town of
or
City of X

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
81855

Registration District No. 2214 Registered No. 40
(For use of Local Registrar)

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? — (5) Number in order of birth 6 (6) Are Parents Married? Yes (7) DATE OF BIRTH 8 24 1916
(None of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jas. Freeman Epps

(9) PRESENT POSTOFFICE OF FATHER Greenville R-1

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 29
(Years)

(12) BIRTHPLACE SC

(13) OCCUPATION Farmer + Coacher

(20) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Nora Elizabeth Cooper

(15) PRESENT POSTOFFICE OF MOTHER same

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 29
(Years)

(18) BIRTHPLACE SC

(19) OCCUPATION wife

(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born live at 4 30 P. M., on the date above stated. (Born alive or stillborn) Hour A. M. or P. M.

(23) (Signature) L. B. Ware

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

M.D. Greenville R-3-

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 Oct 18 1916 (28) John B. Hester 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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