

(1) PLACE OF BIRTH

County of Beaufort
 Township of Beaufort
 or
 Inc. Town of _____
 or
 City of _____

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

1886

Registration District No. 2701Registered No. 5
(For use of Local Registrar)(2) Full Name of Child George Cooke

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

(3) SEX OR GUILD

Boy

(4) Color or Complexion

White

(5) Number in family of birth

1st

(6) Age

1 year

(7) DATE OF BIRTH

March 22

(8) PLACE OF BIRTH

Beaufort

(9) WARD

1st

FATHER

(10) FULL NAME

Emiel Hays

(11) PRESENT POSTOFFICE OF FATHER

Beaufort

(12) COLOR OR RACE

White

(13) AGE AT LAST BIRTHDAY

30

(14) BIRTHPLACE

Beaufort

(15) OCCUPATION

Farmer

MOTHER

(16) NAME BEFORE MARRIAGE

Janie Cook

(17) PRESENT POSTOFFICE OF MOTHER

Beaufort

(18) COLOR OR RACE

White

(19) AGE AT LAST BIRTHDAY

27

(20) BIRTHPLACE

Beaufort

(21) OCCUPATION

Housewife

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

1

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(24) I hereby certify that I attended the birth of this child, who was born alive or stillborn on the date above stated.

(25) (Signature)

Thos. H. Shotton

(26) Name of Physician or Midwife

Thos. H. Shotton

(27) Address of Physician or Midwife

Beaufort

Given name and address of person making report

(28) (Signature)

Janie Cook

(29) Name of Person Making Report

Janie Cook

(30) Address of Person Making Report

Beaufort

(31) Date of Report

March 22

(32) Signature of Witness

Janie Cook

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.