

FORM NO. 2
 ALIGIN REVERSED INK PRINTING. THIS IS A PERMANENT RECORD.
 WRITE PLAINLY, WITH UNFADING INK.—THIS IS A SEPARATE BLANK FOR EACH CHILD, AND MARK THE
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK, No. 2, etc., in question 5.
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH
 County of Union
 Township of Union
 or
 Inc. Town of Union
 or
 City of Union (No. 7 Pine St.; 1 Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (2) Full Name of Child. Carol Merrell If child is not yet named, make supplemental report as directed

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

File No.—For State Registrar Only
44857

(3) BOY OR GIRL? girl (4) Twin or Triplet? no (5) Number in order of birth 1
 (To be answered only in case of twins or triplets) (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 21 1915
 (Name of Month) (Day) (Year)
FATHER.
 (8) FULL NAME Walter Merrell
 (9) PRESENT POSTOFFICE OF FATHER # 7 Pine St Union S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 38 (Years)
 (12) BIRTHPLACE Franklinville N.C.
 (13) OCCUPATION oil mill work
 (20) Number of children born to mother, including present birth 2
MOTHER.
 (14) NAME BEFORE MARRIAGE Ethel Mabray
 (15) PRESENT POSTOFFICE OF MOTHER # 7 Pine St
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 31 (Years)
 (18) BIRTHPLACE Franklinville N.C.
 (19) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 8 A. M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) C. F. P. Jackson M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Union S.C.

Given name added from a supplemental report
 _____, 191____

 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
L. G. Sarratt
 (27) Filed Dec 24 1915 (28) _____ 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.

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.

WHIT

N. B.—McCaw, of Columbia

McCaw, C.