

FORM NO. 2.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

44924

(1) PLACE OF BIRTH

County of Wm.burgTownship of Hopeor
Inc. Town ofor
City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 4301 Registered No. 186
(For use of Local Registrar)(2) Full Name of Child. Cora Mae Dennis } If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Girl (4) Twin or Triplet? - (5) Number in order of birth - (6) Are Parents Married? Yes (7) DATE OF BIRTH June 25 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Copely Dennis(9) PRESENT POSTOFFICE OF FATHER Greenville, S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 22 (Years)(12) BIRTHPLACE Clarendon Co., S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Molney Wilson(15) PRESENT POSTOFFICE OF MOTHER Greenville, S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18 (Years)(18) BIRTHPLACE Wm.burg Co., S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive, at 5 a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Lizzie Bradshaw(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Greenville, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan 10 1916 (28) E. O. Taylor, M.D. Local Registrar

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, No. 1. THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia

*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.