

## (1) PLACE OF BIRTH

County of PeruTownship of Orthello

Inc. Town of .....

City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

1668

Registration District No. 2701 Registered No. 7  
(For use of Local Registrar)

(1) If birth occurs in a hospital or other institution, give name of same instead of street and number. (No. .... St. .... Ward) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child. Allen Forlin Watts Jr If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Boy (4) Twin or triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 3, 1927  
(For use of Local Registrar)

## FATHER.

(8) FULL NAME A Forlin Watts(9) PRESENT POSTOFFICE OF FATHER Candlen # 3(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)(12) BIRTHPLACE Lurshaw(13) OCCUPATION Farmwork(14) Number of children born to mother, including present birth 5

## MOTHER.

(14) NAME BEFORE MARRIAGE Catherine Vaughan(15) PRESENT POSTOFFICE OF MOTHER Candlen(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)(18) BIRTHPLACE Peru Loud Co(19) OCCUPATION House work(20) Number of children of this mother now living, including present birth 5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at Candlen (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.(23) (Signature) W. H. D. D. D. (24) Address of Physician or Midwife Candlen

Given name added from a supplemental report

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

(27) File Jan 10 1927 (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.