

(1) PLACE OF BIRTH

County of Spartanburg

Township of Saluda

Inc. Town of

City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

53927

Registration District No. 4-107 Registered No. 27

(For use of Local Registrar)

2) Full Name of Child Frank Leonard 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 Nov. 30 1914

FATHER.

MOTHER.

(8) FULL NAME James Woodruff

(14) NAME BEFORE MARRIAGE Luzanna Bradley

(9) PRESENT POSTOFFICE OF FATHER Saluda, S.C.

(15) PRESENT POSTOFFICE OF MOTHER Saluda, S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24 (Years)

(12) BIRTHPLACE Saluda, S.C.

(18) BIRTHPLACE Spartanburg

(13) OCCUPATION Farmer

(19) OCCUPATION Horse Raising

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

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Frank X. McCall

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Saluda, 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 4-2-1914 (28) B. J. Jones 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.

fifth month of pregnancy.

(copy from original in pencil.)

MAILED IN BUREAU FOR BUNDLING. WHERE FEASIBLE, WITH ENVELOPING FOR THIS IS A PRACTICE TO BE OBSERVED. IN CASE OF TWINS OR TRIPLETS USE 6 SEPARATE BLANKS FOR EACH CHILD, AND CHECK THE FIRST-BORN. NO. 1. THIS OTHER. NO. 2. (SEE QUESTION 8. McCaw, of Columbia.