

WRITE PLAINLY, WITH EXPANDING INK—THIS IS A PERMANENT RECORD.  
 IN 2-2b 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.

(1) PLACE OF BIRTH

County of Ashe  
 Township of Bellevue  
 Inc. Town of .....  
 City of .....

CERTIFICATE OF BIRTH

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

No. 31408

Registration District No. 24 Registered No. 15  
 (For use of Local Registrar)

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

(2) Full Name of Child Mary Pauline Stalling If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD <u>Girl</u>	(4) Type of Trunk <u>To be reported only in case of Twins or Triplets</u>	(5) Number in order of birth <u>1</u>	(6) Age of Mother <u>20</u>	(7) DATE OF BIRTH <u>May 15 1914</u>
FATHER			MOTHER	
(8) NAME BEFORE MARRIAGE <u>Paul Stalling</u>			(10) NAME BEFORE MARRIAGE <u>James P. Stalling</u>	
(9) PRESENT RESIDENCE OF FATHER <u>Jackson</u>			(11) PRESENT RESIDENCE OF MOTHER <u>Jackson</u>	
(12) COLOR OR RACE <u>White</u>			(13) COLOR OR RACE <u>White</u>	
(14) AGE AT LAST BIRTHDAY <u>35</u>			(15) AGE AT LAST BIRTHDAY <u>20</u>	
(16) BIRTHPLACE <u>Albany</u>			(17) BIRTHPLACE <u>Albany</u>	
(18) OCCUPATION <u>Farming</u>			(19) OCCUPATION <u>Housewife</u>	
(20) Number of children born to mother including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive on the date above stated. (Dead or stillborn) (Hour A. M. or P. M.) 1:30 P.

(23) (Signature) James P. Stalling  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Jackson

Given name added from a supplemental report

affid 5/15/14

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark) James P. Stalling  
 (27) Filed Dec 10 1914 (28) Local Registrar

When made by an 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.