

(1) PLACE OF BIRTH

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County of Leflore

Township of Bull Swamp

or  
Inc. Town of

or

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

2) Full Name of Child

3) BOY OR GIRL Boy (4) Twin or Triplet X (5) Number or order of birth 1  
 to be answered only in event of Twins or Triplets

FATHER.

(8) FULL NAME Reuben Starnes

(9) PRESENT POST-OFFICE OF FATHER Swansea, S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Years)

(12) BIRTHPLACE Leflore Co., S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1

# CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

86478

Registration District No. 3101 Registered No. 127  
 (For use of Local Registrar)

St.; ..... Ward)

(No. ....)

If child is not yet named, make supplemental report as directed

(7) DATE Oct 31 1914  
 BIRTH (Name of Month) (Day) (Year)

(6) Are Parents Married? Yes

MOTHER.

(14) NAME BEFORE MARRIAGE Annie H. H.

(15) PRESENT POST-OFFICE OF MOTHER Swansea S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18 (Years)

(18) BIRTHPLACE Leflore Co., S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive, at Swansea, S.C., on the date above stated. (Four A. M. or P. M.)

(23) (Signature) L. C. [Signature] (24) State whether Physician or Midwife Midwife

Given name added from a supplemental report

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Registrar

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

(27) Filed Nov 13 1914 (28) [Signature] 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.