

## (1) PLACE OF BIRTH

County of WorcesterTownship of Wor  
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

89965

Registration District No. 2106 Registered No. 88

(For use of Local Registrar)

City of .....

(No. .... St.; .... Ward)

(2) Full Name of Child. Jessie Court } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec</u> , <u>80</u> , 19 <u>16</u> (Name of Month) (Day) (Year)
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## FATHER.

(8) FULL NAME Jessie Court(9) PRESENT POSTOFFICE OF FATHER Waverly Mills, S.C.(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 46 (Years)(12) BIRTHPLACE South Carolina(13) OCCUPATION Carpenter(20) Number of children born to mother, including present birth 10

## MOTHER.

(14) NAME BEFORE MARRIAGE Sarah Brown(15) PRESENT POSTOFFICE OF MOTHER Waverly Mills, S.C.(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 82 (Years)(18) BIRTHPLACE South Carolina(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 9

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive, at 12 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Agnie Brown

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife | Waverly Mills, 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 1, 1917 (28) Franklin S. Smith 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.