

McCaw of Columbia
 N. B.—In 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 Darlington
 Township of
 OR
 Inc. Town of Hartsville Registration District No. 15-D Registered No. 99
 OR
 City of (No.) St.; Ward)
 (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
85172

(2) Full Name of Child Lewis Alvin Marshal } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u> <small>To be answered only in event of Twins or Triplets</small>	(5) Number in order of birth <u>5</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>10 9 1916</u> <small>(Name of Month) (Day) (Year)</small>
FATHER.		MOTHER.		
(8) FULL NAME <u>John Marshal</u>	(14) NAME BEFORE MARRIAGE <u>Maggie Webb</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Hartsville</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Hartsville</u>			
(10) COLOR OR RACE <u>American</u>	(11) AGE AT LAST BIRTHDAY <u>34</u>	(16) COLOR OR RACE <u>American</u>	(17) AGE AT LAST BIRTHDAY <u>25</u>	
(12) BIRTHPLACE <u>Darlington S.C.</u>	(18) BIRTHPLACE <u>Darlington</u>			
(13) OCCUPATION <u>Mill operator</u>	(19) OCCUPATION <u>House Keeping</u>			
(20) Number of children born to mother, including present birth <u>5</u>	(21) Number of children of this mother now living, including present birth <u>5</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*
 (22) I hereby certify that I attended the birth of this child, who was alive at 11 : A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) M. E. Howle
 (24) State whether Physician or Midwife
 (25) Address of Physician or Midwife Hartsville 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 Nov 30 1916 (28) J. B. Davis Local Registrar

*When there was no attending physician or midwife, then the father, householders, 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.
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