

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

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.

McCaw, of Columbia.

(1) PLACE OF BIRTH Spartanburg CERTIFICATE OF BIRTH
 County of Spartanburg STATE OF SOUTH CAROLINA,
 Bureau of Vital Statistics
 Township of Spartanburg State Board of Health
 or
 Inc. Town of Registration District No. 4008
 or
 City of (No.) St.; Ward
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No. — For State Registrar Only
74806

Registered No. 035
 (For use of Local Registrar)

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <small>To be answered only in event of twins or triplets</small>	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>August 6, 1916</u> <small>(Name of Month) (Day) (Year)</small>
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FATHER.

(8) FULL NAME Clayd Fisher

(9) PRESENT POSTOFFICE OF FATHER Glendale

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 18
(Years)

(12) BIRTHPLACE Mattison Co. Mo.

(13) OCCUPATION Millwork

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

MOTHER.

(14) NAME BEFORE MARRIAGE Ethel E. Wolfe

(15) PRESENT POSTOFFICE OF MOTHER Glendale

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

(18) BIRTHPLACE Dorchester S.C.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth { none }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at 12:30 P. M.,
 on the date above stated. (Born alive or stillborn) (~~Hour, M. or P. M.~~)

(23) (Signature) A. M. Allen

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Spartanburg S.C.

Given name added from a supplemental report
 191.....
 Registrar

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

(27) Filed Aug 12 1916 (28) E. F. Parker
 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.