

WRITE
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 8.
McCaw, of Columbia.
McCaw,

(1) PLACE OF BIRTH
County of Charlottesville STATE OF SOUTH CAROLINA.
Township of Cross Creek Bureau of Vital Statistics
or
Inc. Town of State Board of Health
or
City of
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only
50486

Registration District No. 7003 Registered No. 5
(For use of Local Registrar)
City of St.; Ward
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 10 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Clyde Virone Walby
(9) PRESENT POSTOFFICE OF FATHER Sumner R. H. #2
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (Years)
(12) BIRTHPLACE Cross Creek S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Elsie Marie Stone
(15) PRESENT POSTOFFICE OF MOTHER Sumner R. H. #2
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30 (Years)
(18) BIRTHPLACE Cross Creek S.C.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 3 A. M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. S. Patton
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Cross Creek 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 Feb 10 1916 (28) W. S. Patton 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.

Registrar W. S. Patton Local Registrar

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