

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 N. No. 1. THE OTHER, No. 2, etc., in question 5.

McCauley, of Columbia.

(1) PLACE OF BIRTH
 County of Charleston
 Township of
 or
 Inc. Town of
 or
 City of Charleston S.C. Registration District No. 9A
 (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
45546

(2) Full Name of Child. Laura Heyward } 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 January, 26th, 1906
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Hamilton Heyward
 (9) PRESENT POSTOFFICE OF FATHER #19 Short St.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 25
 (Years)
 (12) BIRTHPLACE Charleston S.C.
 (13) OCCUPATION Brick-Mason
 (20) Number of children born to mother, including present birth Four

MOTHER.

(14) NAME BEFORE MARRIAGE Mabeline Holmes
 (15) PRESENT POSTOFFICE OF MOTHER #19 Short St.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 22
 (Years)
 (18) BIRTHPLACE Charleston S.C.
 (19) OCCUPATION Laundry work
 (21) Number of children of this mother now living, including present birth Four

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive Born at 10 A.M., on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Nancy Scott

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

Midwife #64 Calhoun St.

Given name added from a supplemental report

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

(27) Filed 1/28/06 (28) J. McCauley M.D.
 Registrar 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.