

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia.

McCaw.

(1) PLACE OF BIRTH

County of Abbeville
 Township of Long Cone
 Inc. Town of _____
 City of _____

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No. 62799 For State Registrar Only

Registration District No. 107 Registered No. 43

(For use of Local Registrar)
 St.; _____ Ward _____

(2) Full Name of Child Ella Lucile Hunt

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 June 6th 1916
To be answered only in event of Twins or Triplets (Same of Month) (Day) (Year)

FATHER.

(8) FULL NAME Evans W. Hunt
 (9) PRESENT POSTOFFICE OF FATHER R.F.D. Abbeville S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 49 (Years)
 (12) BIRTHPLACE Anderson County S.C.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Bessie Boyson
 (15) PRESENT POSTOFFICE OF MOTHER R.F.D. Abbeville S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34 (Years)
 (18) BIRTHPLACE Laurens County S.C.
 (19) OCCUPATION House wife

(20) Number of children born to mother, including present birth 8
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive 5 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. Power M.D.
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Abbeville 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 June 12 1916 (28) E. B. Miller 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 Local Registrar

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