

MARGIN RESERVED FOR BINDING.

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, COLUMBIA, S. C.

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

File No.—For State Registrar Only
90693

(1) PLACE OF BIRTH
County of Lee
Township of Bishopville
or
Inc. Town of
or
City of (No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registered No. 137
(For use of Local Registrar)

Registration District No. 3000

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

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec 22 1916</u> (Name of Month) (Day) (Year)
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FATHER.		MOTHER.	
(8) FULL NAME <u>Tom Simon</u>	(14) NAME BEFORE MARRIAGE <u>Mamie Hendree</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Bishopville S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Bishopville S.C.</u>		
(10) COLOR OR RACE <u>Col</u>	(16) COLOR OR RACE <u>Col</u>		
(11) AGE AT LAST BIRTHDAY <u>40</u> (Years)	(17) AGE AT LAST BIRTHDAY <u>36</u> (Years)		
(12) BIRTHPLACE <u>Lee Co</u>	(18) BIRTHPLACE <u>Lee Co</u>		
(13) OCCUPATION <u>Farmer</u>	(19) OCCUPATION <u>Horse Doctor</u>		
(20) Number of children born to mother, including present birth <u>11</u>	(21) Number of children of this mother now living, including present birth <u>3</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Lilenna Wilson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report	(26) Witness <u>Mar N. J. Laney</u> (Signature of Witness necessary only when question 23 is signed by mark)
....., 19	(27) Filed <u>Dec 23 1916</u> (28) <u>Mar N. J. Laney</u> 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.