

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.

McGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Lee
Township of Bishopville
or
Inc. Town of
or
City of

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

Registration District No. 3000

File No.—For State Registrar Only

90693

Registered No. 137
(For use of Local Registrar)

(No. 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 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? Yes (7) DATE OF BIRTH Dec 22, 1916
(Name of Month) (Day) (Year)

FATHER.			MOTHER.		
(8) FULL NAME	<u>Tom Simon</u>		(14) NAME BEFORE MARRIAGE	<u>Mamie Hendrix</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>	(11) AGE AT LAST BIRTHDAY <u>40</u> (Years)	(16) COLOR OR RACE	<u>Col</u>	(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>House Painter</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 Mr. N. J. Laney
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec 23, 1916 (28) Mr. N. J. Laney 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.