

WHITE 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.  
Caw. of Columbia  
McCaw.

(1) PLACE OF BIRTH

County of Greenville  
Township of Greenville  
or  
Inc. Town of  
or  
City of RT #7 Greenville  
(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  
**64555**

Registration District No. 2209 Registered No. 796  
(For use of Local Registrar)  
St.; Ward

(2) Full Name of Child

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>/</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>/</u>	(7) DATE OF BIRTH <u>6</u> <u>9</u> <u>1916</u> (Name of Month Day Year)
FATHER. (8) FULL NAME <u>Luther Watson</u> (9) PRESENT POSTOFFICE OF FATHER <u>Rt. #7 Greenville</u> (10) COLOR OR RACE <u>W</u> (11) AGE AT LAST BIRTHDAY <u>24</u> (Years) (12) BIRTHPLACE <u>M.C.</u> (13) OCCUPATION <u>Farmer</u> (20) Number of children born to mother, including present birth <u>1</u>				MOTHER. (14) NAME BEFORE MARRIAGE <u>Estey Annis Jones</u> (15) PRESENT POSTOFFICE OF MOTHER <u>same</u> (16) COLOR OR RACE <u>W</u> (17) AGE AT LAST BIRTHDAY <u>23</u> (Years) (18) BIRTHPLACE <u>D.C.</u> (19) OCCUPATION <u>house</u> (21) Number of children of this mother now living, including present birth <u>1</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 3:15 P.M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)  
(23) (Signature) J. B. Hill  
(24) State whether Physician or Midwife Physician (25) Address of Physician, or Midwife Greenville  
Given name added from a supplemental report  
(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Signed June 14 1916 (28) A. H. Mackay Local Registrar  
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.

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