

MARGIN RESERVED FOR INDEXING.  
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.

McGAW OF COLUMBIA, COLUMBIA, B. C.

(1) PLACE OF BIRTH

County of Lancaster.....

Township of Gills Creek...

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.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

15524

Registration District No. 2806 Registered No. 87  
(For use of Local Registrar)

(2) Full Name of Child D. J. (Initials only).....  
(If child is not yet named, make supplemental report as directed)

3) BOY OR GIRL? Boy 4) Twin or Triplet? No 5) Number in order of birth 1 6) Are Parents Married? Yes 7) DATE OF BIRTH 22  
(To be answered only in case of Twins or Triplets) (Name of Month) (Day) (Year)

FATHER.

8) FULL NAME D. J. (Initials only)

9) PRESENT POSTOFFICE OF FATHER Lancaster, S.C.

10) COLOR OR RACE White 11) AGE AT LAST BIRTHDAY 30 (Years)

12) BIRTHPLACE Lancaster, S.C.

13) OCCUPATION Farmer

20) Number of children born to mother, including present birth 1

MOTHER.

14) NAME BEFORE MARRIAGE None

15) PRESENT POSTOFFICE OF MOTHER Lancaster, S.C.

16) COLOR OR RACE White 17) AGE AT LAST BIRTHDAY 30 (Years)

18) BIRTHPLACE Lancaster, S.C.

19) OCCUPATION Farmer

21) Number of children of this mother now living, including present birth 1

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) R. C. Brown

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

Given name added from a supplemental report

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

(27) Filed 6-10-22 (28) J. J. Thompson 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

\*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.