

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

McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Greenville.....

Township of Greenville.....

or
Inc. Town of Greenville.....

or
City of 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

42934

Registration District No. 22-4.....

Registered No. 466.....

(For use of Local Registrar)

St. 4th..... Ward)

(2) Full Name of Child.....

(3) BOY OR GIRL

Boy.

(4) Twin or Triplet? X

(5) Number in order of birth X

(6) Are Parents Married? Yes

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

(7) DATE OF BIRTH 12/20/15.

(Name of Month) (Day) (Year)

(8) FULL NAME M. C. Wood.

FATHER.

(9) PRESENT POSTOFFICE OF FATHER Greenville, S. C.

(10) COLOR OR RACE White.

(11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE Chester County.

(13) OCCUPATION Mill Operative.

(14) Number of children born to mother, including present birth

How.....

(14) NAME BEFORE MARRIAGE Anna Rackley.

(15) PRESENT POSTOFFICE OF MOTHER Greenville, S. C.

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 34 (Years)

(18) BIRTHPLACE Pickens County.

(19) OCCUPATION Housewife.

(20) Number of children of this mother now living, including present birth

Two.....

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was B. Alive, on 6.55 A. M. on the date above stated.

(23) (Signature) M. A. Tack

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

Physician. Greenville, 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 Dec. 20 1916

(28) C. E. Smith 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.

*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.