

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.

MCRAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH
County of Dillon
Township of Hillsboro
OR
Inc. Town of York, S. C.
OR
City of

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

File No.—For State Registrar Only
72433

Registration District No. 1.6.3. Registered No. 134
(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 Genevieve L. Goodwin { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>Y</u> To be answered only in event of Twins or Triplets	(5) Number in order of birth <u>2</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Aug. 9, 1916</u> (Name of Month) (Day) (Year)
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FATHER.
(8) FULL NAME John Wesley Goodwin
(9) PRESENT POSTOFFICE OF FATHER Dillon SC RT 2
(10) COLOR OR RACE white
(11) AGE AT LAST BIRTHDAY 49
(Years)
(12) BIRTHPLACE SC
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 2

MOTHER.
(14) NAME BEFORE MARRIAGE Leila W. Wise
(15) PRESENT POSTOFFICE OF MOTHER Dillon SC RT 2
(16) COLOR OR RACE white
(17) AGE AT LAST BIRTHDAY 32
(Years)
(18) BIRTHPLACE SC
(19) OCCUPATION House wife
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11 A.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W B Baker
(24) State whether Physician or Midwife Midwife
(25) Address of Physician or Midwife York SC

Given name added from a supplemental report
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....., 19

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Sept 9, 1916 (28) W. N. Sevens 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.