

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 North  
Township of Chillicothe  
or  
Inc. Town of .....  
or  
City of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

20395

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

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
(No. .... St.; .... Ward)

(2) Full Name of Child

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 March 19 1902  
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

8) FULL NAME John S. Smith  
9) PRESENT POSTOFFICE OF FATHER Chillicothe, Ga.  
10) COLOR OR RACE White 11) AGE AT LAST BIRTHDAY 35 (Years)  
12) BIRTHPLACE Chillicothe, Ga.  
13) OCCUPATION Farmer

14) NAME BEFORE MARRIAGE Lucy S. Smith  
15) PRESENT POSTOFFICE OF MOTHER Chillicothe, Ga.  
16) COLOR OR RACE White 17) AGE AT LAST BIRTHDAY 30 (Years)  
18) BIRTHPLACE Chillicothe, Ga.  
19) OCCUPATION Housewife

20) Number of children born to mother, including present birth 1 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) John S. Smith (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Chillicothe, Ga.

Given name added from a supplemental report

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

(27) Filed March 19 1902 (28) Local Registrar John S. Smith

\*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.