

WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
 M.B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the  
 FIRST-BORN, No. 1. THIS OFFICE, No. 2, etc., in question 5.

McCaw, of Columbia

(1) PLACE OF BIRTH  
 County of Florence  
 Township of James Bay  
 or McSwain  
 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  
**55879**

Registration District No. 2014 Registered No. 18  
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child, Not named \_\_\_\_\_ If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? \_\_\_\_\_ (5) Number in order of birth \_\_\_\_\_ (6) Are Parents Married? Yes (7) DATE OF BIRTH 4.29.18  
 (Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME Clement J. Hutchinson  
 (9) PRESENT POSTOFFICE OF FATHER Effingham, S.C. R.F.D. 33  
 (10) COLOR W (11) AGE AT LAST BIRTHDAY 44 (Years)  
 (12) BIRTHPLACE S.C.  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 3

**MOTHER.**

(14) NAME BEFORE MARRIAGE Miss Isabelle Turner  
 (15) PRESENT POSTOFFICE OF MOTHER Effingham, S.C. R.F.D.  
 (16) COLOR W (17) AGE AT LAST BIRTHDAY 21 (Years)  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION Domestic  
 (21) Number of children of this mother now living, including present birth 3

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child who was alive at 9:45 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(32) Signature of Physician or Midwife Paul J. Howell  
 (34) State of Physician or Midwife South Carolina (35) Address of Physician or Midwife Florence, S.C.

Given name added from a supplemental report  
May 15, 1918  
C. J. Howell  
 Registrar

(36) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
 (37) Filed May 6 1918 (38) J. C. Rice 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.