

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.

McCaw, of Columbia.

(1) PLACE OF BIRTH
 County of Marlboro
 Township of
 or
 Inc. Town of Bennettsville
 or
 City of

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

File No.—For State Registrar Only
73894
66
 Registered No.
 (For use of Local Registrar)

Registration District No. 33-A

(2) Full Name of Child Hubert Carter Long { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>Y</u>	(7) DATE OF BIRTH <u>Aug. 10, 1916</u> <small>(Name of Month) (Day) (Year)</small>
FATHER.			MOTHER.	
(8) FULL NAME <u>A. Murray Carter Long</u>	(14) NAME BEFORE MARRIAGE <u>Maggie Stubbs</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Bennettsville S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Bennettsville S.C.</u>			
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>36</u> <small>(Years)</small>	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>34</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>Marlboro County S.C.</u>	(18) BIRTHPLACE <u>Marlboro County S.C.</u>			
(13) OCCUPATION <u>Electric Light Employee</u>	(19) OCCUPATION <u>Housewife</u>			
(20) Number of children born to mother, including present birth <u>3</u>	(21) Number of children of this mother now living, including present birth <u>2</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born, at 1:44 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. J. Ramsey, M.D.
 (24) State whether Physician or Midwife Mid (25) Address of Physician or Midwife Bennettsville S.C.

Given name added from a supplemental report
, 191.....
, 191.....
 Registrar

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark.)
 (27) Filed Aug 17 1916 (28) W W Pate
 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.