

(1) PLACE OF BIRTH

County of SumterTownship of Shilohor
Inc. Town of

City of

(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. Mary Lea Keels

File No.—For State Registrar Only

44818

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 4107 Registered No. 113
(For use of Local Registrar)

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 1
To be answered only in case of Twins or Triplets(6) Are Parents Married? Yes(7) DATE OF BIRTH 12 5 1911
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Edgar G. Keels(9) PRESENT POSTOFFICE OF FATHER Shiloh SC(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Years)(12) BIRTHPLACE Sumter Co SC(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 4

MOTHER

(14) NAME BEFORE MARRIAGE Clide Hill(15) PRESENT POSTOFFICE OF MOTHER Shiloh SC(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24 (Years)(18) BIRTHPLACE Sumter Co SC(19) OCCUPATION Housework(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 born alive at 12:00 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. L. ...(24) State whether Physician or Midwife (25) Address of Physician or Midwife ... M.D.

Given name added from a supplemental report

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

(27) Filed 12-15 1911 (28) S. B. McGowan 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.

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MARGIN RESERVED FOR INDEXING.
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.

W. E.

N. E.

McCaw, of Columbia

McCaw