

MARGIN RESERVED FOR INDEXING. RECORD 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 McCaw, of Columbia FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 3.

(1) PLACE OF BIRTH

County of Greenwood
 Township of Hodges
 or
 Inc. Town of
 or
 City of

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

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

19595

Registration District No. 2307 Registered No. 8

(For use of Local Registrar)

(2) Full Name of Child Joie May McAlister } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? X (5) Number and order of birth X (6) Are Parents Married? X (7) DATE OF BIRTH Feb 2 1960
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jesse McAlister
 (9) PRESENT POSTOFFICE OF FATHER Hodges, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Years)
 (12) BIRTHPLACE South Carolina
 (13) OCCUPATION Farming
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Bessie McAlister
 (15) PRESENT POSTOFFICE OF MOTHER Hodges, S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20 (Years)
 (18) BIRTHPLACE South Carolina
 (19) OCCUPATION Housekeeper
 (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 alive at 7 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Carrie Young (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Hodges, S.C.

Given name added from a supplemental report

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Registrar

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

(27) Filed Feb 29 1960 (28) S. L. Brissie 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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