

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 Cheserfield...

Township of .....

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

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

76308

Registration District No. 12A Registered No. 79

(For use of Local Registrar)

(2) Full Name of Child Claton Griffin Ingram

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH

Sept. 7, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Euseley Griffin Ingram

(9) PRESENT POSTOFFICE OF FATHER

Cheraw, S.C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 36

(Years)

(12) BIRTHPLACE

Cheserfield Co S.C.

(13) OCCUPATION

Mgr. Sales - Stable

(20) Number of children born to mother, including present birth

{ 3 }

## MOTHER.

(14) NAME BEFORE MARRIAGE

Nannie Thomas

(15) PRESENT POSTOFFICE OF MOTHER

Cheraw S.C.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 23

(Years)

(18) BIRTHPLACE

Sanford, N.C.

(19) OCCUPATION

House - wife

(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 born alive at 10 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. H. Curves

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Cheraw S.C.

Given name added from a supplemental report

....., 191.....

..... Registrar

(26) Witness .....

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

(27) Filed Oct 11, 1916 (28) J. E. ...

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.