

REMEMBER—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 Charleston

Township of

or

Inc. Town of

or

City of Charleston

(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

84643

Registration District No. 9A

Registered No. 1771

(For use of Local Registrar)

(2) Full Name of Child.

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 Nov. 4 1916

(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Harold Eugene Cude

(14) NAME BEFORE MARRIAGE Agnes Hayes Hall

(9) PRESENT POSTOFFICE OF FATHER 11 Orange St.

(15) PRESENT POSTOFFICE OF MOTHER 11 Orange St.

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 30

(Years)

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 27

(Years)

(12) BIRTHPLACE Missouri

(18) BIRTHPLACE Tenn.

(13) OCCUPATION Professor

(19) OCCUPATION Teacher

20) Number of children born to mother, including present birth { 1

(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 7 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. A. B. B.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed 11/17 1916

(28) Local Registrar

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.