

MARGIN RESERVED FOR BINDING. 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.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

75035

(1) PLACE OF BIRTH

County of Union Co.

Township of Linkney

or
Inc. Town of

City of

Registration District No. 420 (Registered No. 44)

(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of street and number.)

(2) Full Name of Child

Myles Jones

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

(3) BOY OR GIRL? <u>boy</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Aug 2 1906</u> (Name of Month) (Day) (Year)
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FATHER.

MOTHER.

(8) FULL NAME Elis Jones

(9) PRESENT POSTOFFICE OF FATHER Kelton St.

(10) COLOR OR RACE Black AGE AT LAST BIRTHDAY 24 (Years)

(12) BIRTHPLACE St.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth } 2

(14) NAME BEFORE MARRIAGE Ginnie May White

(15) PRESENT POSTOFFICE OF MOTHER Kelton St.

(16) COLOR OR RACE Black AGE AT LAST BIRTHDAY 19 (Years)

(18) BIRTHPLACE St.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth } 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 1030 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Nancy Sims

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

Midwife Kelton St.

Given name added from a supplemental report

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

(27) Filed Aug 10 1906 (28) D. G. Gallman 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.