

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, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Chesterfield  
Township of Court House  
or  
Inc. Town of.....  
or  
City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

76363

Registration District No. 1203 Registered No. 167  
(For use of Local Registrar)

(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

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

(3) BOY OR GIRL? Girl (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. 9, 1916  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Philip James  
(9) PRESENT POSTOFFICE OF FATHER Chesterfield S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26  
(Years)  
(12) BIRTHPLACE Chesterfield Co.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth Two

MOTHER.

(14) NAME BEFORE MARRIAGE Donie McLain  
(15) PRESENT POSTOFFICE OF MOTHER Chesterfield S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20  
(Years)  
(18) BIRTHPLACE Chesterfield Co.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 9:45 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Robert L Gardner M.D.  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Chesterfield S.C.

Given name added from a supplemental report

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

(27) File Sept 15 1916 (28) W E Mulloy 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.