

MAKING REQUESTED 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.

(1) PLACE OF BIRTH  
 County of York  
 Township of .....  
 or  
 Inc. Town of Rock Hill  
 or  
 City of Rock Hill (No. ....) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
 Registration District No. 44 B Registered No. 31  
 (For use of Local Registrar)  
 (2) Full Name of Child Minie McGuint { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Feb. 26</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Zeb. McGuint</u>	(14) NAME BEFORE MARRIAGE <u>Minie Bunyan</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Rock Hill</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Rock Hill</u>			
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>25</u> (Years)	(16) COLOR OR RACE <u>White</u>		(17) AGE AT LAST BIRTHDAY <u>26</u> (Years)
(12) BIRTHPLACE <u>N.C.</u>		(18) BIRTHPLACE <u>N.C.</u>		
(13) OCCUPATION <u>Mill Laborer</u>		(19) OCCUPATION <u>City Laborer in Mill</u>		
(20) Number of children born to mother, including present birth <u>2</u>		(21) Number of children of this mother now living, including present birth <u>2</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Mary McInnis

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

Given name added from a supplemental report ..... 191...  
 .....  
 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) J. R. Miles

(27) Filed 7/24/1911 191... (28) J. R. Miles 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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