

Two to 14  
WITH PLAIN, WITH 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, McGraw, of Columbia

(1) PLACE OF BIRTH

County of Sumter  
Township of Providence  
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  
**44799**

Registration District No. 4105 Registered No. 1411  
(For use of Local Registrar)  
City of (if birth occurs in a hospital or other institution, give name of same instead of street and number.) St.: Ward:

(2) Full Name of Child Annie Council

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

(3) BOY OR GIRL? girl (4) Twin or Triplet? (5) Number in order of birth (6) Are yes Parents Married? (7) DATE OF BIRTH Dec. 1 1918  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert Council

(9) PRESENT POSTOFFICE OF FATHER Providence, S.C.

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 37 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Aslee Johnson

(15) PRESENT POSTOFFICE OF MOTHER Providence, S.C.

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 38 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive, at 4-P.M. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Selle Grant

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Providence, S.C.

Given name added from a supplemental report

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Registrar

(26) Witness Mrs. E. W. Burkett  
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec 4 1918 (28) H. M. Laughlin  
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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