

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.

County of Columbia
Township of Concord

Bureau of Vital Statistics
State Board of Health

14814

Inc. Town of Registration District No. 4100 Registered No. 85
(For use of Local Registrar)
City of (No.) St.; Wa
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mary Sharpe { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL ?	(4) Twin or Triplet?	(5) Number in order of birth <small>To be answered only in event of Twins or Triplets</small>	(6) Are Parents Married?	(7) DATE OF BIRTH <u>Aug 5</u> <small>(Name of Month) (Day) (Year)</small>
FATHER.			MOTHER.	
(8) FULL NAME <u>Legitimate</u>			(14) NAME BEFORE MARRIAGE <u>Mattie Sharpe</u>	
(9) PRESENT POSTOFFICE OF FATHER			(15) PRESENT POSTOFFICE OF MOTHER <u>Sumter</u>	
(10) COLOR OR RACE	(11) AGE AT LAST BIRTHDAY <small>(Years)</small>	(16) COLOR OR RACE <u>negro</u>	(17) AGE AT LAST BIRTHDAY <small>(Years)</small> <u>24</u>	
(12) BIRTHPLACE		(18) BIRTHPLACE <u>S. C.</u>		
(13) OCCUPATION		(19) OCCUPATION <u>Domestic</u>		
(20) Number of children born to mother, including present birth {			(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 born alive
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. Stager

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Sumter S.

Given name added from a supplement-
al report
..... 191.....
..... Registrar

(26) Witness L. H. Newman
(Signature of Witness necessary only
when question 23 is signed by mark)

(27) Filed 7/11 191 6 (28) A. J. Newman
Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return.
a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the
fifth month of pregnancy.