

(1) PLACE OF BIRTH
 County of Clarendon STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 Township of Sandy Swamp State Board of Health
 or
 Inc. Town of Registration District No. 1315 Registered No. 15
 or
 City of (No. Sl.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No. For State Registrar Only
59423

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <small>To be answered only in case of Twins or Triplets</small>	(5) Number in order of birth	(6) Are Parents Married? <u>No</u>	(7) DATE OF BIRTH <u>April 6</u> <small>(Name of Month) (Day) (Year)</small>
FATHER.			MOTHER.	
(8) FULL NAME <u>Fred Davis</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Silver 3rd C</u>		(14) NAME BEFORE MARRIAGE <u>Beatrice Walthers</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Silver 3rd C</u>
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>25</u> <small>(Years)</small>	(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>30</u> <small>(Years)</small>	(18) BIRTHPLACE <u>Clarendon Co</u>
(12) BIRTHPLACE <u>Clarendon Co</u>	(13) OCCUPATION <u>Farmer</u>	(19) OCCUPATION <u>Horse Work</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 alive, at 10 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Elmer Johnson
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Manning

Given name added from a supplemental report

Mary S. 1916
R. S. Barwick
 Registrar

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

(27) Filed 5/8 1916 (28) R. S. Barwick
 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.

M.C. McCaw, of Columbia, PRINTERS, No. 1, THE OFFICE, No. 2, etc., in question 5.