

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.

McCay, of Columbia.

(1) PLACE OF BIRTH
County of Sumter
Township ofor
Inc. Town of
or
City of Sumter (No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of street and number.)**CERTIFICATE OF BIRTH**
STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of HealthFile No.—For State Registrar Only
74848Registration District No. 419 Registered No. 137
(For use of Local Registrar)

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

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Aug. 12 6</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Henry Wilson</u>			(14) NAME BEFORE MARRIAGE <u>Loris C. Coughlin</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Sumter SC</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Sumter SC</u>	
(10) COLOR OR RACE <u>Blk</u>	(11) AGE AT LAST BIRTHDAY <u>26</u> (Years)	(16) COLOR OR RACE <u>Blk</u>	(17) AGE AT LAST BIRTHDAY <u>24</u> (Years)	
(12) BIRTHPLACE <u>Sumter SC</u>			(18) BIRTHPLACE <u>Charleston SC</u>	
(13) OCCUPATION <u>Railroad hand</u>			(19) OCCUPATION <u>Washing and Ironing</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 3 M.,
on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Margaret Harris(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Midwife Sumter SC

Given name added from a supplemental report

....., 191.....

Registrar

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Aug 20 6 191..... (28) W. J. McKay
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.