

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
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.

(1) PLACE OF BIRTH

County of Williamsburg
Township of Peru
or
Inc. Town of.....
or
City of.....
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

83879

Registration District No. 4308 Registered No. 101
(For use of Local Registrar)

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

(3) BOY OR GIRL? girl (4) Twin or Triplet? 4 (5) Number in order of birth 4 (6) All Parents Married? yes (7) DATE OF BIRTH Oct. 1st 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME George McCray
(9) PRESENT POSTOFFICE OF FATHER Bryan, S.C.
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 29 (Years)
(12) BIRTHPLACE Williamsburg co. S.C.
(13) OCCUPATION farm laborer
(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Gamble
(15) PRESENT POSTOFFICE OF MOTHER Bryan, S.C.
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 31 (Years)
(18) BIRTHPLACE Williamsburg co. S.C.
(19) OCCUPATION farm laborer
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 104 M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lylora Ann Hurd
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Bryan, S.C.

Given name added from a supplemental report

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

(27) Filed Oct. 15 1916 (28) Albert R. Mosley
Local Registrar

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