

MARRIAGE REGISTRATION AND BIRTH RECORDS  
 HEALTH PLAIN. WITH REFERRING PAR.—THIS IS A PERMANENT RECORD.  
 B. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the  
 McCaw of Columbia FIRST-BORN, No. 1. THIS OFFICE, No. 2, etc., in question 8.

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only  
**53956**

(1) PLACE OF BIRTH

County of Union

Township of Union

or  
Inc. Town of Union

City of Union

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 421A

Registered No. 34  
(For use of Local Registrar)

(2) Full Name of Child. Jacob Arthur Scott

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet?

*To be answered only in case of Twins or Triplets*

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH

Nov. 12, 1916  
(Name of Month) (Day) (Year)

**FATHER.**

**MOTHER.**

(8) FULL NAME J. P. Scott

(14) NAME BEFORE MARRIAGE Carrie Gibson

(9) PRESENT POSTOFFICE OF FATHER Union

(15) PRESENT POSTOFFICE OF MOTHER Union S.C.

(10) COLOR OR RACE Colored

(11) AGE AT LAST BIRTHDAY 41  
(Years)

(16) COLOR OR RACE Colored

(17) AGE AT LAST BIRTHDAY 35  
(Years)

(12) BIRTHPLACE Georgia

(18) BIRTHPLACE Kershaw Co

(13) OCCUPATION minister

(19) OCCUPATION Domestic

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

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

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was female, at 1 P.M. (Born living or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Vivian Norman

(24) State whether Physician or Midwife (25) Address of Physician or Midwife midwife 338. Waller St

Given name added from a supplemental report

(26) Witness

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

(27) Filed Nov 14 1916

(28)

J. S. Sarratt  
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.

Fifth month of pregnancy.