

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.

McGAY OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Pickens
Township of Central
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.)

(2) Full Name of Child Hattie May Smith

File No.—For State Registrar Only
19806

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

Registration District No. 3700 Registered No. 126
(For use of Local Registrar)

(3) BOY OR GIRL? Girl (4) Twin or Triplet? — (5) Number in order of birth 7 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 7th 1927
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME W. M. Lane Smith
(9) PRESENT POSTOFFICE OF FATHER Central #2
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 34 (Years)
(12) BIRTHPLACE Pickens Co
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Bertha Hodgins
(15) PRESENT POSTOFFICE OF MOTHER Central #2
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 31 (Years)
(18) BIRTHPLACE Oconee Co.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 10 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) L. G. Gentry M. D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Central S. C.

Given name added from a supplemental report

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

(27) Filed July 12 1927 (28) J. D. Beardsley Local Registrar.

*When there was no attending physician or midwife, when 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.

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