Form No. 10.
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.
MARGIN RESERVED FOR BINDING.

(1) PLACE OF BIRTH
County of Dillon
Township of
or
Inc. Town of Bethel
or
City of (No. St.; Ward)
(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. 59750 — For State Registrar Only

Registration District No. 160 6 Registered No. 75
(For use of Local Registrar)

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

(3) BOY OR GIRL	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
Girl	To be answered only in event of Twins or Triplets		Yes	Feb 27 1916 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME Lester McRae	(14) NAME BEFORE MARRIAGE Grace McFarland
(9) PRESENT POSTOFFICE OF FATHER RFD No 2 Latta S C	(15) PRESENT POSTOFFICE OF MOTHER RFD No 2 Latta S C
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 24 (Years)	(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 21 (Years)
(12) BIRTHPLACE S C	(18) BIRTHPLACE S C
(13) OCCUPATION Farming	(19) OCCUPATION Domestic
(20) Number of children born to mother, including present birth One	(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) E. Pearson

(24) State whether Physician or Midwife: Physician

(25) Address of Physician or Midwife: Latta S C

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 4/30 1916 (28) E. B. Bridges
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.

McCaw, of Columbia.

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McCaw.