

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 make the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Dee
 Township of Jugues
 or
 Inc. Town of Monmouth
 or
 City of _____

CERTIFICATE OF BIRTH

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

File No. _____ For State Registrar Only
 74120

Registration District No. 3505 Registered No. 127
 (For use of Local Registrar)
 St.; _____ Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 7 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 20 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME David E. Jones
 (9) PRESENT POSTOFFICE OF FATHER Monmouth, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 37 (Years)
 (12) BIRTHPLACE Dee Co. S.C.
 (13) OCCUPATION Physician
 (20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Fallen McEwen
 (15) PRESENT POSTOFFICE OF MOTHER Monmouth, S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 37 (Years)
 (18) BIRTHPLACE Dee Co. S.C.
 (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 Alive at 11 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. M. Traud, M.D.
 (24) State whether Physician or Midwife _____ (25) Address of Physician or Midwife Monmouth, 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 9-11-1916 (28) W. S. Shelton 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.