

FIRST FORM, NO. 1, THE OTHER, NO. 2, etc., in question 5.
MCCAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH
County of Abbeville
Township of Wadesville
OR
Inc. Town of

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

File No.—For State Registrar Only
62806

Registration District No. 108 Registered No. 53
(For use of Local Registrar)
(No. St.; Ward)

(2) Full Name of Child Eggie May Smith
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 12, 1906
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Walter Smith
(9) PRESENT POSTOFFICE OF FATHER Wadesville S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28
(12) BIRTHPLACE Abbeville S.C.
(13) OCCUPATION Teacher
(20) Number of children born to mother, including present birth 2

MOTHER.
(14) NAME BEFORE MARRIAGE Ida Blackwell
(15) PRESENT POSTOFFICE OF MOTHER Wadesville
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30
(18) BIRTHPLACE Abbeville S.C.
(19) OCCUPATION Housewife
(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 at 2:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Marie M. Jones
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report
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..... 19

(26) Witness John H. Brown
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed June 12, 1906 (28) W.M. Huebner
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.