

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.

McCaw, of Columbia.

(1) PLACE OF BIRTH
 County of Greenville
 Township of Lawson
 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.)

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

File No.—For State Registrar Only
72963

Registration District No. 2206 Registered No. 98
 (For use of Local Registrar)
 St.; Ward

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? ☒ (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Aug. 15 1916
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Frank Smith
 (9) PRESENT POSTOFFICE OF FATHER Simpsonville, S.C.
R. 3.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 41
 (Years)
 (12) BIRTHPLACE Fork Shoals S.C.
 (13) OCCUPATION Farming.

MOTHER.
 (14) NAME BEFORE MARRIAGE Pearl Bagwell.
 (15) PRESENT POSTOFFICE OF MOTHER Simpsonville, S.C. R 3
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20
 (Years)
 (18) BIRTHPLACE Fork Shoals, S.C.
 (19) OCCUPATION Housework.

(20) Number of children born to mother, including present birth { 1 }

(21) Number of children of this mother now living, including present birth { 1 }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 8 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) James A. Thomas

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Fountain Inn S.C.

Given name added from a supplemental report

Amended P-1 JAN 20 1981

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

(27) Filed Sept 10 1916 (28) J. B. Duckert
 Registrar 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.