

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, COLUMBIA, S. C.

(1) PLACE OF BIRTH
 County of Sumter
 Township of Maryville
 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

Registration District No. 4102 Registered No. 94
 (For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child Harry Brady { 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 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 8, 1916
 (Name of Month) (Day) (Year)

FATHER. MOTHER.

(8) FULL NAME Willie Brady (14) NAME BEFORE MARRIAGE Lizzie Johnson
 (9) PRESENT POSTOFFICE OF FATHER S. C. Harbor (15) PRESENT POSTOFFICE OF MOTHER Maryville S. C.
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 21 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 18
 (12) BIRTHPLACE S. C. (18) BIRTHPLACE S. C.
 (13) OCCUPATION farmer (19) OCCUPATION Farmer
 (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 11.9 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sicilia Haurle
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Maryville S. C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) W. G. Haurle
 (27) Filed Aug 17, 1916 (28) W. G. Haurle 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.