

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 Dillon
 Township of Harleesville
 or
 Inc. Town of Registration District No. 1609 Registered No. 65
 or
 City of (No. 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 Willie Ellison { If child is not yet named, make supplemental report as directed

File No.—For State Registrar Only
72405

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 19 1916
To be answered only in event of Twins or Triplets. (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Ellison
 (9) PRESENT POSTOFFICE OF FATHER Dillon SC
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 48 (Years)
 (12) BIRTHPLACE SC
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Mollie McRae
 (15) PRESENT POSTOFFICE OF MOTHER Dillon SC
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 44 (Years)
 (18) BIRTHPLACE SC
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Celia at 12 0 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Care Bethen
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife
Midwife | Dillon SC

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 Aug 26 1916 (28) A. Henderson 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.