

(1) PLACE OF BIRTH

County of Marlboro
 Township of Burnettsville
 or
 Inc. Town of
 or
 City of (No. St. Ward)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

46869

Registration District No. 3301 Registered No. 4
 (For use of Local Registrar)

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 Maluella Nancy McCall { 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 15th 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Harry McCall Jr

(9) PRESENT POSTOFFICE OF FATHER Burnettsville SC

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 40
 (Years)

(12) BIRTHPLACE Darlington Co SC

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth Five

MOTHER.

(14) NAME BEFORE MARRIAGE Louise Jane Hopkin

(15) PRESENT POSTOFFICE OF MOTHER Burnettsville SC

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 32
 (Years)

(18) BIRTHPLACE Marlboro Co SC

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10:30 a. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Louise McCall

(24) State whether Physician or Midwife: Midwife (25) Address of Physician or Midwife: Burnettsville, 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 June 21 1916 (28) W. C. Pate 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.

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.