

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.
 N. B.—No. 1, W. of Columbia.
 McCray

(1) PLACE OF BIRTH

County of Greenville
 Township of Fairmont
 or
 Inc. Town of Simpsonville
 or
 City of

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

File No.—For State Registrar Only
43003

Registration District No. 2206 Registered No. 107
 (For use of Local Registrar)
 St.; Ward)

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

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>no</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec 25 1902</u> (Name of Month) (Day) (Year)
FATHER.		MOTHER.		
(8) FULL NAME <u>Jim Beaudin</u>	(14) NAME BEFORE MARRIAGE <u>Wm Hallmark</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Simpsonville</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Simpsonville</u>			
(10) COLOR OR RACE <u>White</u> (11) AGE AT LAST BIRTHDAY <u>24</u> (Years)	(16) COLOR OR RACE <u>White</u> (17) AGE AT LAST BIRTHDAY <u>24</u> (Years)			
(12) BIRTHPLACE <u>Laurens Co</u>	(18) BIRTHPLACE <u>Greenville Co</u>			
(13) OCCUPATION <u>Farming</u>	(19) OCCUPATION <u>Law Work</u>			
(20) Number of children born to mother, including present birth <u>3</u>	(21) Number of children of this mother now living, including present birth <u>3</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 1:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) E. H. Harp
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report 191.....
 Registrar
 (26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
 (27) Filed Jan 11 1916 (28) J. H. Duckitt 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.
Deputy 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 fifth month of pregnancy.