

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.
 MCGRAW HILL BOOK COMPANY, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Horry
 Township of Corry
 or
 Inc. Town of
 or
 City of

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

File No.—For State Registrar Only
77531

Registration District No. 2502 Registered No. 147
 (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 Elliott Davis J. 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 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept-17-1916
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Elliott Davis
 (9) PRESENT POSTOFFICE OF FATHER Corry Se
 (10) COLOR OR RACE (11) AGE AT LAST BIRTHDAY 30
 (Years)
 (12) BIRTHPLACE Horry Co
 (13) OCCUPATION —
 (20) Number of children born to mother, including present birth {

MOTHER.
 (14) NAME BEFORE MARRIAGE Mary Davis
 (15) PRESENT POSTOFFICE OF MOTHER Corry Se
 (16) COLOR OR RACE (17) AGE AT LAST BIRTHDAY 22
 (Years)
 (18) BIRTHPLACE Horry Co
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth {

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Sallie Moore
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Corry

Given name added from a supplemental report

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(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Sept 26 1916 (28) J. D. Dogan 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.