

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 Bamberg
Township of Manchester
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

74877

Registration District No. 4101 Registered No. 8
(For use of Local Registrar)

(2) Full Name of Child Lucina Coopers

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 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 17, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Grant Coopers
(9) PRESENT POSTOFFICE OF FATHER Pine wood
(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 32 (Years)
(12) BIRTHPLACE Clarendon Co S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Lucina James
(15) PRESENT POSTOFFICE OF MOTHER Pine wood
(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 28 (Years)
(18) BIRTHPLACE Sumter Co
(19) OCCUPATION Housewife
(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 born at 7 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Elmer Bruner Poplarwood
(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Grant Coopers

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Aug 26, 1916 (28) Grant Coopers 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.