

(1) PLACE OF BIRTH

County of 1 BarnwellTownship of Barnwellor
Inc. Town of BarnwellCity of (No.)

(If birth occurs in a hospital, or other institution, give name of same instead of street and number.)

(2) Full Name of Child

Lewis Wise Davis

File No. — For State Registrar Only

88441

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 501 Registered No. 70
(For use of Local Registrar)(3) BOY OR
GIRL? boy(4) Twin
or Triplet?

Is to be answered only in case of twins or triplets

(5) Number in
order of birth(6) Are
Parents
Married? yes(7) DATE OF Dec 2 1916
BIRTH (Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME Lewis Ellis Davis(9) PRESENT
POSTOFFICE
OF FATHER Barnwell(10) COLOR
OR
RACE White(11) AGE AT LAST
BIRTHDAY 27
(Years)(12) BIRTHPLACE Williston SC(13) OCCUPATION Clerk(20) Number of children born to
mother, including present birth 2

MOTHER.

(14) NAME BEFORE
MARRIAGE Elizabeth May Wise(15) PRESENT
POSTOFFICE
OF MOTHER Barnwell SC(16) COLOR
OR
RACE White(17) AGE AT LAST
BIRTHDAY 23
(Years)(18) BIRTHPLACE Williston SC

(19) OCCUPATION

(21) Number of children of this mother
now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 4:15 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. B. Hooley(24) State whether Physician or Midwife (25) Address of Physician or Midwife Barnwell SCGiven name added from a supplemen-
tal report

(26) Witness

(Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed Dec 10 1916

(28)

R. K. Kneel and
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.*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.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. McCRAW, of Columbia