

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 N. No. 1. THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia.

(1) PLACE OF BIRTH
 County of Charleston
 Township of
 or
 Inc. Town of
 or
 City of Charleston (No. West Point)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar Only
45560

(2) Full Name of Child Baley Cummings } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? — (5) Number in order of birth — (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 21 1916
(To be answered only in event of Twins or Triplets) (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Cummings
 (9) PRESENT POSTOFFICE OF FATHER Charleston S.C.
 (10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 23 (Years)
 (12) BIRTHPLACE Charleston S.C.
 (13) OCCUPATION Carpenter
 (20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Whelmina Reid
 (15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.
 (16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 20 (Years)
 (18) BIRTHPLACE Charleston S.C.
 (19) OCCUPATION None
 (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 alive at 8:30 11 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. Fraser Wilson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician 277 Calhoun St

Given name added from a supplemental report

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

(27) Filed 1/25/16 1916 (28) J. Mercer's Green M.D. 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.