

MARGIN RESERVED FOR BINDING.

Form No. 3

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

No. 12.—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

(1) PLACE OF BIRTH  
County of Charleston  
Township of .....  
or  
Inc. Town of .....  
or  
City of Charleston  
(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  
**45583**

Registration District No. 9A Registered No. 115  
(For use of Local Registrar)  
City of Charleston (No. 25 Green St. St.; ..... Ward)  
(If child is not yet named, make supplemental report as directed)

(2) Full Name of Child. Harold Holmes

(3) BOY OR GIRL? Boy (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 8 1916  
(Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME William Holmes  
(9) PRESENT POSTOFFICE OF FATHER Charleston, S.C.  
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 29 (Years)  
(12) BIRTHPLACE Charleston, S.C.  
(13) OCCUPATION Driver  
(20) Number of children born to mother, including present birth Six

**MOTHER.**

(14) NAME BEFORE MARRIAGE Wilhelmina Seemster  
(15) PRESENT POSTOFFICE OF MOTHER Charleston, S.C.  
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 36 (Years)  
(18) BIRTHPLACE Charleston, S.C.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth Six

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was born at 12:40 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Harold R. Seemster  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Charleston, S.C.

Given name added from a supplemental report

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

(27) Filed 1/17 1916 (28) J. Mercer Chace, 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.