

Form No. 16. MARGIN RESERVED FOR INDEXING
 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.

(1) PLACE OF BIRTH

County of Lee

Township of

or
 Inc. Town of Bishopville

or
 City of

(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

90683

Registration District No. 502

Registered No. 36

(For use of Local Registrar)

St.; Ward

(2) Full Name of Child

Emma Lee Alford

If child is not yet named, make supplemental report as directed

(3) ~~BOY OR~~
 GIRL?

(4) Twin
 or Triplet?

(5) Number in
 order of birth

To be answered only in event of Twins or Triplets

(6) Are
 Parents
 Married

(7) DATE OF
 BIRTH Dec. 23, 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL
 NAME

Henry Alford

(9) PRESENT
 POSTOFFICE
 OF FATHER

Bishopville S.C.

(10) COLOR
 OR
 RACE

Col

(11) AGE AT LAST
 BIRTHDAY 22

(Years)

(12) BIRTHPLACE

Bishopville S.C.

(13) OCCUPATION

Day Laborer

(20) Number of children born to
 mother, including present birth

2

MOTHER.

(14) NAME BEFORE
 MARRIAGE

Laura McDonald

(15) PRESENT
 POSTOFFICE
 OF MOTHER

Bishopville S.C.

(16) COLOR
 OR
 RACE

Col

(17) AGE AT LAST
 BIRTHDAY 19

(Years)

(18) BIRTHPLACE

Lee Co.

(19) OCCUPATION

Home Duties

(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 at P. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Hester Dixon

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Bishopville S.C.

Given name added from a supplement-
 al report

....., 191.....

..... Registrar

(26) Witness

MR. H. J. Laney

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

(27) Filed

Jan. 2, 1917

(28) MR. H. J. Laney sub

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.