

FORM NO. 8
 WRIT N. H.—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 8.
 MARRIAGE RECORDS, ERIC BIRTHING,
 WITH UNFADING INK—THIS IS A REQUIREMENT RECORDS.
 N. E. McCaw, of Columbia

(1) PLACE OF BIRTH

County of Orange
 Township of Orange
 or
 Inc. Town of
 or
 City of (No.) (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
50149

Registration District No. 3613 Registered No. 22
 (For use of Local Registrar)

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? Is he answered and in event of Twins or Triplets (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 28th
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Ben Smith
 (9) PRESENT POSTOFFICE OF FATHER Augusta Ga
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 37
 (Years)
 (12) BIRTHPLACE South Wales England
 (13) OCCUPATION House Trade and Farming
 (20) Number of children born to mother, including present birth 15th

MOTHER.
 (14) NAME BEFORE MARRIAGE Maggie Harrison
 (15) PRESENT POSTOFFICE OF MOTHER Augusta Ga
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 35
 (Years)
 (18) BIRTHPLACE Burke Co Pa
 (19) OCCUPATION House wife
 (21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 2:10 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. ...
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Columbia S.C.

Given name added from a supplemental report
 _____, 191...
 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Feb 15 1916 (28) A. G. Fairley 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.

Registrar _____ Local Registrar _____

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