

MARGIN RESERVED FOR BINDING.

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, COLUMBIA, S. C.

(1) PLACE OF BIRTH
 County of Marlboro
 Township of Bennettsville
 OR
 Inc. Town of
 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
73920

Registration District No. 3301 Registered No. 155
 (For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child Mary Lee Sanders If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 17, 1916
 (Name of Month) (Day) (Year)

FATHER. MOTHER.

(8) FULL NAME Charles Sanders (14) NAME BEFORE MARRIAGE Cresie Williams
 (9) PRESENT POSTOFFICE OF FATHER Bennettsville S.C. (15) PRESENT POSTOFFICE OF MOTHER Bennettsville S.C.
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 32 (Years) (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 24 (Years)
 (12) BIRTHPLACE Marlboro Co S.C. (18) BIRTHPLACE Marlboro Co S.C.
 (13) OCCUPATION Farming (19) OCCUPATION Housewife
 (20) Number of children born to mother, including present birth One (21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn at 11 9 M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) Millie Kelly
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Bennettsville S.C.

Given name added from a supplemental report

 19 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
Aug 26, 1916
 (27) Filed 1916 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.