

WRITE FAIRLY, 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 Kershaw
Township of
or
Inc. Town of
or
City of Camden S.C.
(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
64892

Registration District No. 27a Registered No. 35
(For use of Local Registrar)
St. 7 Ward 7

(2) Full Name of Child. May Elizabeth Wooten

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 case of Twins or Triplets

(5) Number in order of birth 7

(6) Are Parents Married? yes

(7) DATE

BIRTH June 12 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME F. M. Wooten

(9) PRESENT POSTOFFICE OF FATHER Camden S.C.

(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 40 (Years)

(12) BIRTHPLACE NC

(13) OCCUPATION grocery wholesaler

(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE alive Brady

(15) PRESENT POSTOFFICE OF MOTHER Camden S.C.

(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 35 (Years)

(18) BIRTHPLACE Fla.

(19) OCCUPATION

(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 8:15 P. M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) How. Cooper M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Camden 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 June 30 1916 (28) W. H. Johnson 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.

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