

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.

McCall, of Columbia

(1) PLACE OF BIRTH  
 County of Spaulding  
 Township of Woodruff

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only

83577

Inc. Town of ..... or .....  
 City of ..... (No. ....) Registered No. 142  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
 St.: ..... Ward: .....

(2) Full Name of Child Rozell Cary { 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 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 21, 1916  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Daniel Marion Cary

(9) PRESENT POSTOFFICE OF FATHER Woodruff SC RFD #1

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 53 (Years)

(12) BIRTHPLACE Spaulding Co

(13) OCCUPATION farmer

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

## MOTHER.

(14) NAME BEFORE MARRIAGE Mary Betta Cary

(15) PRESENT POSTOFFICE OF MOTHER Woodruff SC RFD #1

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 37 (Years)

(18) BIRTHPLACE Greenville County, N.C.

(19) OCCUPATION House keeper

(21) Number of children of this mother now living, including present birth 6

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 10:45 P. M., (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) H. H. Woodruff

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Woodruff SC

Given name added from a supplemental report

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

(27) Filed 11/10 1916. (28) Chas. L. Boyter 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.