

FORM NO. 1.

(1) PLACE OF BIRTH

County of W. B. W.Township of JohnsInc. TOWN OF
OR

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 4304Registered No. 555

(For use of Local Registrar)

(2) Full Name of Child

Mary Evelyn Scott

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

(3) BOY OR
GIRL?Girl(4) Twin
or Triplet?1(5) Number in
order of birth

to be assigned only in case of twins or triplets

(6) Are
Parents
Married?Yes(7) DATE OF
BIRTHJan. 12, 1914
(Month) (Day) (Year)

FATHER.

(8) FULL
NAMEWilliam Scott(9) PRESENT
POSTOFFICE
OF FATHERHamway P. C.(10) COLOR
OR
RACEWhite(11) AGE AT LAST
BIRTHDAY22
(Years)

(12) BIRTHPLACE

S. C.

(13) OCCUPATION

Farmer(14) Number of children born to
mother, including present birth2

MOTHER.

(14) NAME BEFORE
MARRIAGELucretia Garden(15) PRESENT
POSTOFFICE
OF MOTHERHamway P. C.(16) COLOR
OR
RACEWhite(17) AGE AT LAST
BIRTHDAY19
(Years)

(18) BIRTHPLACE

S. C.

(19) OCCUPATION

Housewife(20) Number of children of this mother
now living, including present birth2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 5:00 A. M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature)

Unice L. Leaps

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

MidwifeHamway P. C.Given name added from a supplement-
tal report131

Registrar

(26) Witness

L. L. C.(Signature of Witness necessary only
when question 22 is signed by parent)(27) Filed Jan. 12, 1914

(28)

L. L. C.

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.

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
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 5.

McCaw, of Columbia.