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 Sumter Co.

Township of Privateer

or

Inc. Town of

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only: 2587

Registration District No. 4104 Registered No. 3 (For use of Local Registrar)

(No. St.; Ward)

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

(2) Full Name of Child Vera Alleen — If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl | (4) Twin or Triplet? | (5) Number in order of birth — To be answered only in event of Twins or Triplets | (6) Are Parents Married? yes | (7) DATE OF BIRTH Jan. 5-1922 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME Frank Allenen	(14) NAME BEFORE MARRIAGE Sallie Slater
(9) PRESENT POSTOFFICE OF FATHER Sumter, S.C. No. 2.	(15) PRESENT POSTOFFICE OF MOTHER Sumter, S.C. No. 2.
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 48 (Years)	(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 46 (Years)
(12) BIRTHPLACE Sumter Co. S.C.	(18) BIRTHPLACE Sumter Co. S.C.
(13) OCCUPATION Farming	(19) OCCUPATION Housework Etc.
(20) Number of children born to mother, including present birth Fifteen	(21) Number of children of this mother now living, including present birth Eleven

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) [signature]

(24) State whether Physician or Midwife: Midwife

(25) Address of Physician or Midwife: Sumter, S.C. N6

Given name added from a supplemental report

19 Registrar

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

(27) Filed 1-10-1922 19 (28) [signature] 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.