

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 6.

McCAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <i>Sumter</i>		STATE OF SOUTH CAROLINA		87618	
Township of <i>Privateer</i>		Bureau of Vital Statistics			
or		State Board of Health			
Inc. Town of		Registration District No. <i>B104</i>		Registered No. <i>135</i>	
or				(For use of Local Registrar)	
City of		(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 <i>James Hazel Canty</i>		If child is not yet named, make supplemental report as directed			
(3) BOY OR GIRL <i>Boy</i>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <i>Yes</i>	(7) DATE OF BIRTH <i>Nov. 30, 1916</i>	
To be answered only in event of Twins or Triplets					
FATHER.			MOTHER.		
(8) FULL NAME <i>Manley Canty Jr</i>			(14) NAME BEFORE MARRIAGE <i>Emma A. Baker</i>		
(9) PRESENT POSTOFFICE OF FATHER <i>Sumter S.C.R.#2</i>			(15) PRESENT POSTOFFICE OF MOTHER <i>Sumter S.C.R.#2</i>		
(10) COLOR OR RACE <i>Negro</i>		(11) AGE AT LAST BIRTHDAY <i>40</i>	(16) COLOR OR RACE <i>Negro</i>		(17) AGE AT LAST BIRTHDAY <i>34</i>
(12) BIRTHPLACE <i>Sumter Co. S.C.</i>		(18) BIRTHPLACE <i>Sumter Co. S.C.</i>			
(13) OCCUPATION <i>Farming</i>		(19) OCCUPATION <i>Housewife</i>			
(20) Number of children born to mother, including present birth <i>9</i>		(21) Number of children of this mother now living, including present birth <i>9</i>			
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
(22) I hereby certify that I attended the birth of this child, who was <i>born alive</i> at <i>4:30 a.m.</i> on the date above stated. (Hour A. M. or P. M.)					
(23) (Signature) <i>Emma L. Montgomery</i>		(24) State whether Physician or Midwife <i>Midwife</i>			
Given name added from a supplemental report		(25) Witness <i>A. B. Kolt</i>			
		(26) (Signature of Witness necessary only when question 23 is signed by mark)			
		(27) Filed <i>Dec 7, 1916</i>		(28) <i>Silas B. Kolt</i>	
		Registrar		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.