

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 5.

McCAW OF COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of *Sumter*
Township of *Middleton*
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
87604

Registration District No. *4103* Registered No. *80*
(For use of Local Registrar)

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

(2) Full Name of Child *Ruth Angelina Norrie* (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL *girl* (4) Twin or Triplet? *No* (5) Number in order of birth *1* (6) Are Parents Married? *yes* (7) DATE OF BIRTH *Nov 13/16*
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME *Alex Norrie*
(9) PRESENT POSTOFFICE OF FATHER *Wedgfield SC*
(10) COLOR OR RACE *White* (11) AGE AT LAST BIRTHDAY *25* (Years)
(12) BIRTHPLACE *South Carolina*
(13) OCCUPATION *Rural Policeman*

MOTHER.

(14) NAME BEFORE MARRIAGE *Leela Johnson*
(15) PRESENT POSTOFFICE OF MOTHER *Wedgfield SC*
(16) COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *28* (Years)
(18) BIRTHPLACE *North Carolina*
(19) OCCUPATION *Domestic*

(20) Number of children born to mother, including present birth *1* (21) Number of children of this mother now living, including present birth *1*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) *M L Parker MD*
(24) State whether Physician or Midwife *Physician* (25) Address of Physician or Midwife *Wedgfield SC*

Given name added from a supplemental report

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

(27) Filed *Nov 14 1916* (28) *M L Parker MD* 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.