

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
No. 1.—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 3.
McCOMB, of Columbia.

FORM NO. 3

(1) PLACE OF BIRTH

County of Dorchester

Township of Roger

or
Inc. Town of

or
City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

46073

Registration District No. 1705

Registered No. 4

(For use of Local Registrar)

St.: Ward:

(2) Full Name of Child

(3) BOY OR GIRL? girl (4) Twin or Triplet? one (5) Number in order of birth Two (6) Are Parents Married? no (7) DATE OF BIRTH Jan 17
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Legitimant
(9) PRESENT POSTOFFICE OF FATHER Reesville, S.C.
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY (Years)
(12) BIRTHPLACE don't know
(13) OCCUPATION
(14) Number of children born to mother, including present birth { 2

MOTHER.

(14) NAME BEFORE MARRIAGE Mattie Lee Green
(15) PRESENT POSTOFFICE OF MOTHER Reesville, S.C.
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 19 (Years)
(18) BIRTHPLACE Dorchester Co., S.C.
(19) OCCUPATION farm work
(20) Number of children of this mother now living, including present birth { 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) T. J. Green

(24) State whether Physician or Midwife Address of Physician or Midwife

Given name added from a supplemental report 191.....
.....
Registrar

(25) Witness
(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Feb 10 1916 (28) L. M. Aceton
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.