

MARGIN RESERVED FOR INDEXING.  
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.

(1) PLACE OF BIRTH  
County of RICHMOND STATE OF SOUTH CAROLINA.  
Township of LOWER Bureau of Vital Statistics  
Inc. Town of Lafayette State Board of Health  
City of Lafayette Registration District No. 3803

File No.—For State Registrar Only  
**66066**

(2) Full Name of Child Tony Sales

Registered No. 164  
(For use of Local Registrar)

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 17</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>James Sales</u>			(14) NAME BEFORE MARRIAGE <u>Julia Neil</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Lafayette</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Lafayette</u>	
(10) COLOR OR RACE <u>negro</u>			(16) COLOR OR RACE <u>negro</u>	
(11) AGE AT LAST BIRTHDAY <u>25</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>22</u> (Years)	
(12) BIRTHPLACE <u>Lafayette</u>			(18) BIRTHPLACE <u>Lafayette</u>	
(13) OCCUPATION <u>Miner</u>			(19) OCCUPATION <u>Housewife</u>	
(20) Number of children born to mother, including present birth <u>Three</u>			(21) Number of children of this mother now living, including present birth <u>Three</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 10 A.M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary J. ...

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Lafayette S. C.

Given name added from a supplemental report

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

(27) Filed 6/10/16 (28) F. L. Smith  
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.

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