

FORM NO. 4. 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.

(1) PLACE OF BIRTH

County of Newberry
Township of
or
Inc. Town of Whitman
or
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

73998

Registration District No. 3607 Registered No. 178

(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. Hatter Ellen Brazil If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>3</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Aug 15th 1916</u>
<small>Is to be answered only in case of twins or triplets</small>				<small>(Name of Month) (Day) (Year)</small>

FATHER.

(8) FULL NAME Geo W Brazil

(9) PRESENT POSTOFFICE OF FATHER Whitman S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE Pickens Co S.C.

(13) OCCUPATION Mill Operating

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Janie Louise Hawkins

(15) PRESENT POSTOFFICE OF MOTHER Whitman S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)

(18) BIRTHPLACE Richland Co S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive 7:30 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jas H Moore M.D.

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

Given name added from a supplemental report

July 24 1917
C. W. Miller
Miller Registrar

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

(27) Filed Aug 16 1916 (28) W. S. [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.