

MARGIN RESERVED FOR BINDING.

WHITE 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.

Form No. 1.

(1) PLACE OF BIRTH

County of Charleston  
Township of St. Philip

# CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only  
**45666**

Inc. Town of ..... or  
City of Charleston (No. Myers)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 909 Registered No. 63  
(For use of Local Registrar)

(2) Full Name of Child Jessie Cooper

If child is not yet named, make supplemental report as directed

(3) ~~BOY OR~~ GIRL? G. (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 11, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Daniel Cooper  
(9) PRESENT POSTOFFICE OF FATHER Myers, P.O. S.C.  
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 25 (Years)  
(12) BIRTHPLACE Holly Hill, S.C.  
(13) OCCUPATION Phos. Labor  
(20) Number of children born to mother, including present birth { 2nd

## MOTHER.

(14) NAME BEFORE MARRIAGE Martha Weala  
(15) PRESENT POSTOFFICE OF MOTHER Myers, P.O. S.C.  
(16) COLOR OR RACE — (17) AGE AT LAST BIRTHDAY 27 (Years)  
(18) BIRTHPLACE Holly Hill, S.C.  
(19) OCCUPATION Housewife  
(21) 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 born alive at 6:30 P. M. on the date above stated. (Born alive or stillborn) (Hour and P. M.)

(23) (Signature) Hannah Edg. Plante  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Jan 14, 1916 (28) L. T. Myers 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.