Form No. 8

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
MARGIN RESERVED FOR BINDING.

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, COLUMBIA, S. C.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
91660

(1) PLACE OF BIRTH

County of Saluda

Township of No. 1

or

Inc. Town of .....

or

City of ..... (No. ..... St.; ..... Ward)

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

Registration District No. 3904 Registered No. 28 (For use of Local Registrar)

(2) Full Name of Child ..... If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy

(4) Twin or Triplet? — (To be answered only in event of Twins or Triplets)

(5) Number in order of birth 5th

(6) Are Parents Married? Yes

(7) DATE OF BIRTH 12/15 1916 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Pierce Addy

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

(10) COLOR OR RACE Negro

(11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE Saluda Co

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 5th

MOTHER.

(14) NAME BEFORE MARRIAGE Sallie Jones

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

(16) COLOR OR RACE Negro

(17) AGE AT LAST BIRTHDAY 29 (Years)

(18) BIRTHPLACE Saluda Co

(19) OCCUPATION Housework

(21) Number of children of this mother now living, including present birth 5th

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) J. Mirchdon

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

..... 19 ....
Registrar

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

(27) Filed 1 Feb 16 19 (28) W. Jones
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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