

(1) PLACE OF BIRTH

County of ColumbiaTownship of Remuda

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

69693

Registration District No. 3602 Registered No. 48

(For use of Local Registrar)

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>March 18</u> <u>1916</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Jim Crow</u>			(14) NAME BEFORE MARRIAGE <u>Colla Mass</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Walhalla S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Walhalla S.C.</u>	
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>40</u> (Years)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>42</u> (Years)	
(12) BIRTHPLACE <u>Oconee Co</u>			(18) BIRTHPLACE <u>Oconee Co</u>	
(13) OCCUPATION <u>Farming</u>			(19) OCCUPATION <u>House wife</u>	
(20) Number of children born to mother, including present birth <u>2</u>			(21) Number of children of this mother now living, including present birth <u>2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 1 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Mrs. L. C. Collins(24) State whether Physician or Midwife (25) Address of Physician or Midwife mid wife

Given name added from a supplemental report

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Registrar

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

(27) Filed 4/10 1916 (28) L. W. 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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McGraw-Hill, Inc., New York, N. Y. 10036. No. 1. THE OTHER, No. 2, etc., in question 2.