

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 *Charleston*

Township of

or

Inc. Town of

or

City of *Charleston*

(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

45549

Registration District No. *44*Registered No. *75*

(For use of Local Registrar)

(2) Full Name of Child *Baity Alice Grist*

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

(3) BOY OR GIRL *Girl*

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twins or Triplets

(6) Are Parents Married? *Y.*

(7) DATE OF BIRTH

Jan. 6, 1915

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Dr. Patrick Grist

(9) PRESENT POSTOFFICE OF FATHER

Charleston, S. C.(10) COLOR OR RACE *White*(11) AGE AT LAST BIRTHDAY *21* (Years)

(12) BIRTHPLACE

Jordanville S. C.

(13) OCCUPATION

Mechanic

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

Three

MOTHER.

(14) NAME BEFORE MARRIAGE

Ruth Moorhead

(15) PRESENT POSTOFFICE OF MOTHER

Charleston S. C.(16) COLOR OR RACE *White*(17) AGE AT LAST BIRTHDAY *18* (Years)

(18) BIRTHPLACE

Gaffney S. C.

(19) OCCUPATION

House Duties

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

Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *Alive* at *2:30* P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) *W. C. Beckman*

(24) State whether Physician or Midwife

*Physician**Dr. W. C. Beckman*

Given name added from a supplemental report

191....

Registrar

(26) Witness

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

(27) Filed *1/10*

191....

(28)

J. M. Beckman
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.