

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, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Charleston
 Township of St. Philip
 or
 Inc. Town of St. Philip
 or
 City of St. Philip
 (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
18170

Registration District No. 1203

Registered No. 75
 (For use of Local Registrar)

(No. St.; Ward)
 (If child is not yet named, make supplemental report as directed)

(2) Full Name of Child

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
<u>Girl</u>	<u>No</u>	<u>1</u>	<u>Yes</u>	<u>July 8, 1922</u> (Name of Month) (Day) (Year)

FATHER.

(8) **FULL NAME** James H. Smith

(9) **PRESENT POSTOFFICE OF FATHER** St. Philip

(10) **COLOR OR RACE** White

(11) **AGE AT LAST BIRTHDAY** 27
(Years)

(12) **BIRTHPLACE** St. Philip

(13) **OCCUPATION** Farmer

(20) **Number of children born to mother, including present birth** 1

MOTHER.

(14) **NAME BEFORE MARRIAGE** Ellen S. C.

(15) **PRESENT POSTOFFICE OF MOTHER** St. Philip

(16) **COLOR OR RACE** White

(17) **AGE AT LAST BIRTHDAY** 23
(Years)

(18) **BIRTHPLACE** St. Philip

(19) **OCCUPATION** House Keeping

(21) **Number of children of this mother now living, including present birth** 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 1:22 M.
 on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature) W. H. Nelson
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife St. Philip

Given name added from a supplemental report

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

(27) Filed July 8, 1922 (28) M. S. Watson
 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.

Given name added from a supplemental report
 19.....
 REGISTRAR

Filed June 30, 1922 M. S. Watson
 REGISTRAR