

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 Charleston
 OR
 Inc. Town of
 OR
 City of Charleston S.C. (No. 664 King St.)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 9A Registered No. 1000
 (For use of Local Registrar)

File No.—For State Registrar Only
76011

(2) Full Name of Child John Eugene Wise } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>B.</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>Sept. 20, 1914</u> (Name of Month) (Day) (Year)
FATHER.		MOTHER.		
(8) FULL NAME <u>John Washington Wise</u>		(14) NAME BEFORE MARRIAGE <u>Miss Cynthia S. Edwards</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Charleston S.C.</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>Charleston S.C.</u>		
(10) COLOR OR RACE <u>W.</u>	(11) AGE AT LAST BIRTHDAY <u>28</u> (Years)	(16) COLOR OR RACE <u>W.</u>	(17) AGE AT LAST BIRTHDAY <u>29</u> (Years)	
(12) BIRTHPLACE <u>Holly Hill S.C.</u>		(18) BIRTHPLACE <u>Charleston S.C.</u>		
(13) OCCUPATION <u>Carpenter</u>		(19) OCCUPATION <u>House Wife</u>		
(20) Number of children born to mother, including present birth <u>One</u>		(21) Number of children of this mother now living, including present birth <u>One</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 4 P. M., on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) M. S. Wilson

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife 1351 Philly St.

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 9/22/14 (28) J. Merwin Green, M.D.
 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.