

FORM NO. 5

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

McCaw of Columbia FIRST-BORN No. 1, THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Anderson.

Township of Garvin.

or
Inc. Town ofor
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

80187

Registration District No. 315

Registered No. 111

(For use of Local Registrar)

St. Ward

(2) Full Name of Child James Alexandria.

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

(3) BOY OR GIRL?
Boy.

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Aug 20, 1916

FATHER.

(8) FULL NAME Frank Alexandria.

(9) PRESENT POSTOFFICE OF FATHER Anderson S.C., #2.

(10) COLOR OR RACE Black.

(11) AGE AT LAST BIRTHDAY 24.

(12) BIRTHPLACE

Anderson Co., S.C.

(13) OCCUPATION

Farm Hand.

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

MOTHER.

(14) NAME BEFORE MARRIAGE Annie Gambrell.

(15) PRESENT POSTOFFICE OF MOTHER Anderson S.C., #2.

(16) COLOR OR RACE Black.

(17) AGE AT LAST BIRTHDAY 23.

(18) BIRTHPLACE

Anderson Co., S.C.

(19) OCCUPATION

Farm Laborer.

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive on the date above stated.

(Born alive or stillborn) at 9 A.M.

(23) (Signature) Liza Smith.

(24) State whether Physician or Midwife

Midwife.

(25) Address of Physician or Midwife

Anderson S.C., #2.

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 11/16

1916

(28)

R. L. Casey

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.