

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH INFADING 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, S. C.

(1) PLACE OF BIRTH

County of Orange Co.
Township of Cutaw
or
inc. Town of
or
City of

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
86921

Registration District No. 3.6.6

Registered No. 1.8....
(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Lenny Davis If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>—GIRL—</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Oct 18 1915</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Henry Davis
(9) PRESENT POSTOFFICE OF FATHER Cutawville
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 26 (Years)
(12) BIRTHPLACE Orangeburg
(13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Lena
(15) PRESENT POSTOFFICE OF MOTHER Cutawville S. C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY (Years)
(18) BIRTHPLACE Orangeburg Co. S. C.
(19) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1
(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 2.12 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mellie Wessiman
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Cutawville S. C.

Given name added from a supplemental report

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

(27) Filed Nov 1 1915 (28) W. H. Hunter 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.