

(1) PLACE OF BIRTH

County of Beaufort
 Township of Beaufort
 or
 Inc. Town of
 or
 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
58754

Registration District No. 600 Registered No. B. 49
 (For use in Local Registrar)
 St.; Ward)
 (No.)

(2) Full Name of Child

James Miller { 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 4-01-1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Miller

(9) PRESENT POSTOFFICE OF FATHER Port Royal

(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 28 (Years)

(12) BIRTHPLACE Beaufort County.

(13) OCCUPATION Laborer

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Minnie Jackson

(15) PRESENT POSTOFFICE OF MOTHER Port Royal

(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 26 (Years)

(18) BIRTHPLACE Beaufort County.

(19) OCCUPATION Laborer

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 6 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Patty X Heyward
 (24) State whether Physician or Midwife Physician

Given name added from a supplemental report

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

(27) Filed 4-21-1916 (28) M. B. Cope
 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.

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.