

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

Dorchester

Township of

Dorchester

Inc. Town of

or

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

72482

Registration District No.

1702

Registered No.

36

(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Aug 16, 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Ben Truerson

(9) PRESENT POSTOFFICE OF FATHER

Summerville, S.C.

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

25

(Years)

(12) BIRTHPLACE

Dorchester Co.

(13) OCCUPATION

Milkman at Dairy

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

2

MOTHER.

(14) NAME BEFORE MARRIAGE

Isabelle Peace

(15) PRESENT POSTOFFICE OF MOTHER

Summerville, S.C.

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

22

(Years)

(18) BIRTHPLACE

Berkeley Co.

(19) OCCUPATION

Housewife

(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 *12:10* a.m., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Edmund W. Semons

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Summerville, S.C.

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

Apr 5 1916

(28)

Chas. Lavoton

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.