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 th. FIRST-BORN, No 1. THE OTHER, No 2, etc., in question 5

McCAW OF COLUMBIA, COLUMBIA, S. C.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
19959

(1) PLACE OF BIRTH

County of Richland

Township of .....
or
Inc. Town of .....
or
City of Columbia

Registration District No. 38 Registered No. 1446
(For use of Local Registrar)

(No. 1019 Green 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 Martha Edwine Beverly (If child is not yet named, make supplemental report as directed)

(3) BOY OR 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?	(7) DATE OF BIRTH. (Name of Month)	(Day)	(Year)
Girl			Yes	June	6	1923

FATHER.

(8) FULL NAME: William E. Beverly
(9) PRESENT POSTOFFICE OF FATHER: Columbia S.C.
(10) COLOR OR RACE: White
(11) AGE AT LAST BIRTHDAY: 27 (Years)
(12) BIRTHPLACE: S.C.
(13) OCCUPATION: Painter
(20) Number of children born to mother, including present birth: 3

MOTHER.

(14) NAME BEFORE MARRIAGE: Florie Carter
(15) PRESENT POSTOFFICE OF MOTHER: Columbia S.C.
(16) COLOR OR RACE: White
(17) AGE AT LAST BIRTHDAY: 22 (Years)
(18) BIRTHPLACE: S.C.
(19) OCCUPATION: Domestic
(21) Number of children of this mother now living, including present birth: 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Female alive at 7:45 A.M., on the date above stated.
(Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) G. B. LaBorde Physician
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife Columbia S.C.

Given name added from a supplemental report

..... 19 ....
Registrar

(26) Witness .....
(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 6-23 19 .... (28) ..... 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.

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