

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 *Lexington*Township of *Boiling Springs*

Inc. Town of

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

73760

Registration District No. *3108* Registered No. *22*

(For use of Local Registrar)

(2) Full Name of Child *James Monroe Smith*

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

July 25th 1916

To be answered only in event of Twins or Triplets

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Moody Smith

(9) PRESENT POSTOFFICE OF FATHER

Lexington, S.C. Rfd 3

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

27

(Years)

(12) BIRTHPLACE

Gilbert S.C.

(13) OCCUPATION

Cotton Milling

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

{ *3* }

MOTHER.

(14) NAME BEFORE MARRIAGE

Jessie Edna Hallman

(15) PRESENT POSTOFFICE OF MOTHER

Lexington S.C. Rfd 3

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

21

(Years)

(18) BIRTHPLACE

Seesville S.C.

(19) OCCUPATION

Home

(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 *alive*, at *2* *a* *M.* on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

*Physician**J. J. Wingard M.D.
Lexington, 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

Sept. 6, 1916

(28)

P. H. Derrick

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.