

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
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.

McGAW OF COLUMBIA, COLUMBIA, S. C.

Form No. 1

(1) PLACE OF BIRTH

County of Aiken
Township of Aiken
or
Inc. Town of
or
City of (No. St.; Ward)

(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

40563

Registration District No. 200

Registered No.
(For use of Local Registrar)

(2) Full Name of Child Willie May Cummings (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? girl (4) Twin or Triplet? — (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH July 23, 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jobbie Cummings
(9) PRESENT POSTOFFICE OF FATHER
(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 24
(12) BIRTHPLACE — (Years)
(13) OCCUPATION farming
(20) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Addie Bell Graham
(15) PRESENT POSTOFFICE OF MOTHER Aiken
(16) COLOR OR RACE (17) AGE AT LAST BIRTHDAY 32
(18) BIRTHPLACE James Shavers (Years)
(19) OCCUPATION farming
(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Midwife

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Aiken, R. 2, Box 26

Given name added from a supplemental report

(26) Witness Jennie Johnson

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

(27) Filed 19

(28)

(29) 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.