

(1) PLACE OF BIRTH

County of Columbia

Township of

or

Inc. Town of

or

City of Williamston

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

(2) Full Name of Child Jesse Shaw

File No.—For State Registrar Only

62953

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 3C

Registered No. 21

(For use of Local Registrar)

(3) BOY OR GIRL? Girl

(4) Twin or Triplet? No

(5) Number in order of birth 1

(6) Are Parents Married? Yes

(7) DATE OF BIRTH June 30 1916

(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME L. M. Shaw

(9) PRESENT POSTOFFICE OF FATHER Williamston S.C.

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 34

(Years)

(12) BIRTHPLACE Pickens County

(13) OCCUPATION Carpenter

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

MOTHER

(14) NAME BEFORE MARRIAGE Elizabeth

(15) PRESENT POSTOFFICE OF MOTHER Williamston S.C.

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 23

(Years)

(18) BIRTHPLACE Williamston S.C.

(19) OCCUPATION Housewife

(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 Born alive 9 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. W. Wells

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed July 6 1916

(28)

M. W. Wells Local Reg

*When there was no attending physician or midwife, then the father, householder, etc., should make this report a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before fifth month of pregnancy.

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IN CASE OF TWINS OR TRIPLETS, WRITE SEPARATELY FOR EACH CHILD, AND MARK THE FIRST-BORN. No. 1. THE OTHER, No. 2, etc. in question 5.