

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 BeaufortTownship of Blufftonor
Inc. Town ofor
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

58773

Registration District No. 601 Registered No. 23

(For use of Local Registrar)

(2) Full Name of Child infant not named

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

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH <u>May, 22, 1916</u>
To be answered only in event of Twins or Triplets				(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Neptune Nelson(9) PRESENT POSTOFFICE OF FATHER Ochute P. O. S.C.(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 70 (Years)(12) BIRTHPLACE Beaufort County, S.C.(13) OCCUPATION Farmer & U.S. pensioner(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Olive Jenkins(15) PRESENT POSTOFFICE OF MOTHER Ochute P. O. S.C.(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 21 (Years)(18) BIRTHPLACE Beaufort County S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 10 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Malsie Mangels

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Ochute P. O. S.C.

Given name added from a supplemental report

(26) Witness W. J. Tripp (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed June 2, 1916 (28) W. J. Tripp 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.