

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 Richland
Township of
Inc. Town of
City of Columbia
(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
66021

Registration District No. 382 Registered No. 165
(For use of Local Registrar)
No. 82 Bonwell St.; Ward
(If child is not yet named, make supplemental report as directed)

(2) Full Name of Child Kalchugou

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>Two</u> <small>Indicate in case of Twins or Triplets</small>	(5) Number in order of birth <u>12</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 10, 1911</u> <small>(Name of Month) (Day) (Year)</small>
FATHER.			MOTHER.	
(8) FULL NAME <u>Will Keechugou</u>			(14) NAME BEFORE MARRIAGE <u>Will M. Pherson</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>1812 Bonwell St</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>1812 Bonwell</u>	
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>45</u> <small>(Years)</small>	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>40</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>O R</u>		(18) BIRTHPLACE <u>O R</u>		
(13) OCCUPATION <u>Laborer</u>		(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>12</u>		(21) Number of children of this mother now living, including present birth <u>7</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) W. J. Keeney
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report
.....
Registrar

(26) Witness
(Signature of Witness necessary only when question 22 is signed by mark)
(27) Filed July 7, 1911 (28) William C. Pherson
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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