

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 Anderson  
Township of Shaw  
or  
Inc. Town of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

66897

Registration District No. 211 Registered No. 9  
(For use of Local Registrar)  
City of ..... (No. .... St.; ..... Ward)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)(2) Full Name of Child. Hartley Henderson { 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 June 4 1911  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME William Henderson  
(9) PRESENT POSTOFFICE OF FATHER Cumma N.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 29 (Years)  
(12) BIRTHPLACE Georgia  
(13) OCCUPATION O.R. Hand.  
(20) Number of children born to mother, including present birth { 6 .....

## MOTHER.

(14) NAME BEFORE MARRIAGE Anna Shaw  
(15) PRESENT POSTOFFICE OF MOTHER Cumma N.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)  
(18) BIRTHPLACE Arkansas  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth { 6 .....

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Alive at 1-30 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Hartley Henderson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

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 7/25 191....(28) G. F. Shaw

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.