

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 BerkleyTownship of 2ndor Town of Jamiesor City of Jamies

(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

84472

Registration District No. 701 Registered No. 59

(For use of Local Registrar)

(2) Full Name of Child Elisha James Mixon } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>GIRL</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Nov 15 1916</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME <u>J. A. Mixon</u>	(11) AGE AT LAST BIRTHDAY <u>36</u> (Years)
(9) PRESENT POSTOFFICE OF FATHER <u>Summerville S.C.</u>	
(10) COLOR OR RACE <u>White</u>	(12) BIRTHPLACE <u>Berkley Co</u>
(13) OCCUPATION <u>Blacksmith</u>	
(20) Number of children born to mother, including present birth <u>1</u>	

MOTHER.

(14) NAME BEFORE MARRIAGE <u>Barrie Gattlin</u>	(17) AGE AT LAST BIRTHDAY <u>30</u> (Years)
(15) PRESENT POSTOFFICE OF MOTHER <u>Summerville S.C.</u>	
(16) COLOR OR RACE <u>White</u>	(18) BIRTHPLACE <u>Berkley Co</u>
(19) OCCUPATION <u>House work</u>	
(21) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(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 Nov 26 1916

(28)

R. G. Hammon
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.