

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, Columbia, S. C.

(1) PLACE OF BIRTH

County of York CO
Township of Fort Mill SC
or
Inc. Town of
or
City of (No. St.; Ward)
(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

75268

Registration District No. 4406 Registered No. 69
(For use of Local Registrar)

(2) Full Name of Child

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

(3) ~~BOY~~ GIRL (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 25 1906
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Ed davis
(9) PRESENT POSTOFFICE OF FATHER
(10) COLOR OR RACE Cf man
(11) AGE AT LAST BIRTHDAY
(12) BIRTHPLACE S.C.
(13) OCCUPATION farmer
(20) Number of children born to mother, including present birth 3 children

(14) NAME BEFORE MARRIAGE Mary dave
(15) PRESENT POSTOFFICE OF MOTHER Fort Mill S.C.
(16) COLOR OR RACE colored
(17) AGE AT LAST BIRTHDAY
(18) BIRTHPLACE S.C.
(19) OCCUPATION Farmer
(21) Number of children of this mother now living, including present birth 3 children

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Anna P. ...
(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

Mrs. ...
... 1906
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 9-9-06 (28) A. J. Parks Local Registrar.

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