

FORM NO. 2
 MARYLAND RESERVE FOR THE MARYLAND
 WRITING PLAINLY. WHEN CAPADINER FOR THIS IS A FURNISHED BY THE
 N. H.—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 1.
 McNamee, of Columbia.

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Division of Vital Statistics
 State Board of Health

County of Charleston
 Township of _____
 In the Town of _____
 City of _____
 If birth occurs in a hospital or other institution, give name of same instead of street and number.
Early May
 Full Name of Child Lucy May

Registration District No. 2003 Registered No. 392
 For use of State Registrar
 If child is not yet named, name
 anticipated, report as desired.

(1) SEX <u>Female</u>	(4) Twin or Triplet? <u>No</u> <small>If so, give order of birth.</small>	(5) Number in order of birth <u>1</u>	(6) Age at Birth <u>28</u>	(7) Name of Mother <u>John</u>
(8) FATHER <u>John</u>			(9) NAME BEFORE MARRIAGE <u>John</u>	
(10) PRESENT POSTOFFICE OF FATHER <u>John</u>			(11) PRESENT POSTOFFICE OF MOTHER <u>John</u>	
(12) COLOR OR RACE <u>White</u>	(13) AGE AT LAST BIRTHDAY <u>28</u> Years	(14) COLOR OR RACE <u>White</u>		
(15) BIRTHPLACE <u>John</u>			(16) BIRTHPLACE <u>John</u>	
(17) OCCUPATION <u>John</u>			(18) OCCUPATION <u>John</u>	
(19) Number of children of the mother now living, including present birth <u>1</u>				

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(20) I hereby certify that I attended the birth of this child, who was born alive John A. R. & A.
 on the date above stated.

(21) (Signature) John A. R. & A.

(22) State whether Physician or Midwife Physician

(23) Witness (Signature of Witness necessary only when question 22 is signed by midwife)
John A. R. & A.

(24) Filed June 9, 1914 (25) John A. R. & A. Local Registrar

Given name added from a supplemental report
June 9, 1914
John A. R. & A. 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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