

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 Dillon

Township of Harborside

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

72406

Registration District No. 1602 Registered No. 66  
(For use of Local Registrar)

(2) Full Name of Child Jessie Hayes

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

(3) BOY OR GIRL? any (4) Twin or Triplet? (5) Number in order of birth (6) Are 380 Parents Married? (7) DATE OF BIRTH June 14, 1916  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jessie Hayes

(9) PRESENT POSTOFFICE OF FATHER Latta SC

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 34 (Years)

(12) BIRTHPLACE SC

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth { 4

MOTHER.

(14) NAME BEFORE MARRIAGE Mary

(15) PRESENT POSTOFFICE OF MOTHER Latta SC

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 32 (Years)

(18) BIRTHPLACE SC

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth { 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 4 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Cassie Bethea

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Dillon SC

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 any 26, 1916 (28) H. H. Anderson 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.