

## (1) PLACE OF BIRTH

County of Horry  
 Township of Simpson Creek  
 or  
 Inc. Town of \_\_\_\_\_  
 or  
 City of \_\_\_\_\_

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only

7991

Registration District No. 75P.9Registered No. 5  
(For use of Local Registrar)

(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

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH Jan 1 1927  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Willie Albert Canabey(9) PRESENT POSTOFFICE OF FATHER Allsbrook S.C.R.(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 44 (Years)(12) BIRTHPLACE Columbus Co., N.C.(13) OCCUPATION Farming(20) Number of children born to mother, including present birth Seven

## MOTHER.

(14) NAME BEFORE MARRIAGE Quanda Ekins McLean(15) PRESENT POSTOFFICE OF MOTHER Allsbrook S.C.R.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 48 (Years)(18) BIRTHPLACE Horry Co., S.C.(19) OCCUPATION Housewife(21) Number of children of this mother new living, including present birth Eight

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 6:30 A.M., 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

1927

(28)

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.

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