

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 York
 Township of York
 or
 Inc. Town of York
 or
 City of York

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

75180

Registration District No. 44-4 Registered No. 44
 (For use of Local Registrar)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Maggie Jackson

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 4 (6) Are Parents Married? No (7) DATE OF BIRTH Aug. 28, 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Kirk Lowry
 (9) PRESENT POSTOFFICE OF FATHER York, S.C.
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 36 (Years)
 (12) BIRTHPLACE York Co. S.C.
 (13) OCCUPATION Laborer

MOTHER.

(14) NAME BEFORE MARRIAGE Lessie Jackson
 (15) PRESENT POSTOFFICE OF MOTHER York S.C.
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28 (Years)
 (18) BIRTHPLACE York Co. S.C.
 (19) OCCUPATION Housewife

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

(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 Born alive at 2 a. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Eddie X. Wilcox

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

Midwife York, S.C.

Given name added from a supplemental report

(26) Witness Philip W. Hunter
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Aug. 29, 1916 (28) W. J. Walker 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.