

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

Township of

or

Inc. Town of

or

City of

(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

76365

Registration District No.

Registered No.

(For use of Local Registrar)

## (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?

Twin

(5) Number in order of birth

2

To be answered only in event of Twins or Triplets

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH.

Sept. 9, 1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Alford Brown Rivers

(9) PRESENT POSTOFFICE OF FATHER

Sherrill S. C. R-1

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

30

(Years)

(12) BIRTHPLACE

Chesterfield Co

(13) OCCUPATION

Farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE

Lucy Ellen Jones

(15) PRESENT POSTOFFICE OF MOTHER

Sherrill S. C. R-1

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

29

(Years)

(18) BIRTHPLACE

Chesterfield Co

(19) OCCUPATION

Housewife

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

Six

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

Three

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was

born alive..... at 10:16 P.M.,  
(Born alive or stillborn) (Hour A. M. or P. M.)

on the date above stated.

(23) (Signature)

Robert L. Haskins, M.D.

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Chesterfield Co

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed

Sept 15, 1916

(28)

J. E. McEllogh

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.