

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 8.
McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Beaufort
Township of Bluffton
or
Inc. Town of Bluffton
or
City of

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only
63196

Registration District No. 601 Registered No. 27
(For use of Local Registrar)
St.; Ward

(2) Full Name of Child. Thomas Haynes

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1
To be answered only in event of Twins or Triplets (6) Are Parents Married? Yes (7) DATE OF BIRTH June 4, 1916
(Same of Month) (Day) (Year)

FATHER.

(8) FULL NAME Joseph Haynes
(9) PRESENT POSTOFFICE OF FATHER Bluffton, S.C.
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 39
(Years) (12) BIRTHPLACE Beaufort County, S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 8

MOTHER.

(14) NAME BEFORE MARRIAGE Jane Hamblenton
(15) PRESENT POSTOFFICE OF MOTHER Bluffton, S.C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 39
(Years) (18) BIRTHPLACE Beaufort County, S.C.
(19) OCCUPATION housewife
(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 5 a M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Caroline Moore
(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Midwife Bluffton, S.C.

Given name added from a supplemental report

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

(27) Filed June 24, 1916 (28) W. F. Tripp
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.