

K. E.—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 Newville
 Township of Newville
 or
 Inc. Town of
 or
 City of Woodville

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

43060

Registration District No. 2 Registered No. 4
 (For use of Local Registrar)

(2) Full Name of Child Amber Jones

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Feb 5
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Clayton Jones

(9) PRESENT POSTOFFICE OF FATHER 52 - 2nd Woodville

(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 27
 (Years)

(12) BIRTHPLACE I.C.

(13) OCCUPATION Barber

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Nettie Hollimon

(15) PRESENT POSTOFFICE OF MOTHER Woodville 2 - 2nd St

(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 23
 (Years)

(18) BIRTHPLACE I.C.

(19) OCCUPATION Housework

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born this 10 P M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. J. Little

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

Given name added from a supplemental report

9/10 1916
Clonnet
J. J. Little Registrar

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

(27) Filed 1916 (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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