

(1) PLACE OF BIRTH

County of Darlington

- CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Township of Palmettoor
Inc. Town ofRegistration District No. 137 Registered No.City of (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 Mary Earles { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? girl (4) Twin or Triplet? - (5) Number in order of birth - (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 10 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Edgar Mc Bride
(9) PRESENT POSTOFFICE OF FATHER Darlington
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY - (Years)
(12) BIRTHPLACE ante - know
(13) OCCUPATION " "

MOTHER.

(14) NAME BEFORE MARRIAGE Christy Thomas
(15) PRESENT POSTOFFICE OF MOTHER Darlington
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 22 (Years)
(18) BIRTHPLACE Darlington Co
(19) OCCUPATION Team hand

(20) Number of children born to mother, including present birth { (21) Number of children of this mother now living, including present birth { 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 10 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) T. L. Prince (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness E. A. Early
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Jan 24 1916 (28) E. A. Early
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.

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.
McGraw, of Columbia.File No. — For State Registrar Only
46010