

Form No. 10.

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.

Caw. of Columbia.

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(1) PLACE OF BIRTH

County of YorkTownship of Bullock Creek

Inc. Town of

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

50790

Registration District No. 4403Registered No. 5-
(For use of Local Registrar)(2) Full Name of Child James William Gird

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
to be answered only in event of twins or triplets(6) Are Parents Married? yes(7) DATE OF BIRTH Feb. 19 1906
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Gird(9) PRESENT POSTOFFICE OF FATHER Hickory Grove, S.C.(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 29
(Years)(12) BIRTHPLACE York Co., S.C.(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 13

MOTHER.

(14) NAME BEFORE MARRIAGE Janie Foster(15) PRESENT POSTOFFICE OF MOTHER Hickory Grove, S.C.(16) COLOR OR RACE Negro(17) AGE AT LAST BIRTHDAY 26
(Years)(18) BIRTHPLACE York Co., S.C.(19) OCCUPATION Housekeeping(20) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:30 9 A. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Adeline Gird(24) State whether Physician or Midwife: Midwife(25) Address of Physician or Midwife Hickory Grove, S.C.

Given name added from a supplemental report

(26) Witness Mrs. J. E. McElroy

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

(27) Filed Feb. 25 1906(28) J. E. McElroy 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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