

(1) PLACE OF BIRTH

County of Glynn

Township of Namiah

Inc. Town of Namiah

City of Namiah

### CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
19108

Registration District No. 2016 Registered No. 6  
(For use of Local Registrar)

(No. 6 St.; 6 Ward)  
If birth occurs in a hospital or other institution, give name of same instead of street and number.)

2) Full Name of Child Martha Louise Powell If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or triplet? no (5) Number in order of birth 1 (6) Are Parents Married yes (7) DATE OF BIRTH Jan 21 1910  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Tom Aubrey Powell

(9) PRESENT POSTOFFICE OF FATHER Namiah

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE Florida Co

(13) OCCUPATION Farming

(14) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Jessie Louise Stone

(15) PRESENT POSTOFFICE OF MOTHER Namiah S C

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 32 (Years)

(18) BIRTHPLACE Florida Co

(19) OCCUPATION Farming

(20) Number of children of this mother now living, including present birth 7

### CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 9 P.M. (Born alive or stillborn) (Hour, M. or P. M.)  
on the date above stated.

(23) (Signature) [Signature]  
(24) State whether Physician or Midwife: Physician (25) Address of Physician or Midwife: [Address]

Given name added from a supplemental report  
..... 191.....  
.....  
..... Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
.....  
(27) Filed ..... 191..... (28) Local Registrar.

Form No. 10.  
\*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.