

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 McCaw, of Columbia FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of

Township of

or  
Inc. Town  
or

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

64446

Registration District No. 22. A

Registered No. 247

(For use of Local Registrar)

No. 123 Leach

St.; Ward

(2) Full Name of Child Harold Sholihely

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

(3) BOY OR GIRL?

boy

(4) Twin or Triplet?

X

(5) Number in order of birth

7

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

June 20

1916

## FATHER.

(8) FULL NAME

Jno. Sholihely.

(9) PRESENT POSTOFFICE OF FATHER

123 Leach St

(10) COLOR OR RACE

colored

(11) AGE AT LAST BIRTHDAY

43

(Years)

(12) BIRTHPLACE

Augusta Ga.

(13) OCCUPATION

Brick mason.

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

7

## MOTHER.

(14) NAME BEFORE MARRIAGE

Mary Young.

(15) PRESENT POSTOFFICE OF MOTHER

123 Leach St

(16) COLOR OR RACE

colored

(17) AGE AT LAST BIRTHDAY

37

(Years)

(18) BIRTHPLACE

Clinton.

(19) OCCUPATION

Laundry work.

(21) 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 on the date above stated.

born, at 3:22 A.M. (Hour A. M. or P. M.)

(23) (Signature)

Vina Steinhorn

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

416 Calhoun St

Given name added from a supplemental report

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Registrar

(26) Witness

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

(27) Filed June 22 1916

(28) C. Smith

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.

fifth month of pregnancy.