

Form No. 1.

(1) PLACE OF BIRTH

County of Ort

Township of Ort

or

Inc. Town of

or

City of Ort

(No. Sumner side)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child. Earthen Clay Isaac

File No.—For State Registrar Only

50073

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 3 b a

Registered No. 28

(For use of Local Registrar)

St.; 128 Ward

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

(3) ~~SEX~~ OR GIRL? girl

(4) Twin or Triplet?

(5) Number in order of birth 1

(6) Are Parents Married? yes

(7) DATE OF BIRTH

2-5-6 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Patric Isaac

(9) PRESENT POSTOFFICE OF FATHER

Ort

(10) COLOR OR

negro

(11) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE

Ort

(13) OCCUPATION

house

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

5

MOTHER.

(14) NAME BEFORE MARRIAGE

Aminie Moore

(15) PRESENT POSTOFFICE OF MOTHER

Ort

(16) COLOR OR

negro

(17) AGE AT LAST BIRTHDAY 26 (Years)

(18) BIRTHPLACE

Ort

(19) OCCUPATION

house work

(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 born alive, at 5 A.M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Katie Moore

(24) State whether Physician or Midwife midwife

(25) Address of Physician or Midwife Danahuey St

Given name added from a supplemental report

(26) Witness

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

(27) Filed Feb 10 1916

(28) W. A. Duke Local Registrar

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. McCaw, of Columbia.