

Form No. 10.
WHITE 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
McCauley of Columbia

(1) PLACE OF BIRTH

County of Union

Township of Little Rock

or
Inc. Town of

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

59698

Registration District No. 1602 Registered No. 25
(For use of Local Registrar)

(2) Full Name of Child

John H. Dewey Branch

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 case of Twins or Triplets

(6) Are
Parents
Married?

(7) DATE
BIRTH

April, 26, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME

Cleveland Branch

(9) PRESENT
POSTOFFICE
OF FATHER

Little Rock, S.C.

(10) COLOR
OR
RACE

White

(11) AGE AT LAST
BIRTHDAY

23
(Years)

(12) BIRTHPLACE

N.C.

(13) OCCUPATION

Farmer

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

One

MOTHER.

(14) NAME BEFORE
MARRIAGE

Mariella Barfield

(15) PRESENT
POSTOFFICE
OF MOTHER

Little Rock, S.C.

(16) COLOR
OR
RACE

White

(17) AGE AT LAST
BIRTHDAY

20
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Housewife

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

One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 440 P
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Betha Midwife

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Minutem, S.C.

Given name added from a supplement-
tal report

191

Registrar

(26) Witness

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

(27) Filed

May 23, 1916

(28)

H. A. Henderson
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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