

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.

(1) PLACE OF BIRTH

County of

Caltham

Township of

Caw Caw

or
Inc. Town ofor
City of(No. Street; Ward)
(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

48250

Registration District No. 801 Registered No. 11

(For use of Local Registrar)

(2) Full Name of Child Minnie Riley

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

(3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

(5) Number in order of birth 2

(6) Are Parents Married?

(7) DATE OF BIRTH

Feb. 16, 1916

To be answered only in case of twins or triplets

(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

Cortis Riley

(9) PRESENT POSTOFFICE OF FATHER

North

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

31

(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Hammer

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

Two

(14) NAME BEFORE MARRIAGE

Eugenie Riley

(15) PRESENT POSTOFFICE OF MOTHER

North

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

23

(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Hammer

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

Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 2 PM on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

J. P. J. J. J.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

191...

Registrar

(26) Witness

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

(27) Filed

Feb. 1916.

(28)

J. H. J. J. J.
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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