

Form No. 10. **MAILED - RETURNED FOR INDEX.**
 THESE PLACES, WITH SPACING INDICATED BY DASHES, ARE TO BE PRINTED IN FULL.
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE
 CRAWL OF COLUMBIA

(1) PLACE OF BIRTH
 County of Greenville
 Township of Fairview
 or
 Inc. Town of Registration District No. 2206 Registered No. 5
 or
 City of (For use of Local Registrar)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child, J. W. Harrison (full name) If child is not yet named, make supplemental report as directed

File No.—For State Registrar Only
46343

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>Neither</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan. 14 1916</u>
FATHER.			MOTHER.	
(8) FULL NAME <u>Grady Harrison</u>	(14) NAME BEFORE MARRIAGE <u>Olivia Steinhouse</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Ft Inm S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Ft Inm S.C.</u>			
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>22</u>	(16) COLOR OR RACE <u>Black</u>		
(12) BIRTHPLACE <u>Greenville, Co</u>	(17) AGE AT LAST BIRTHDAY <u>20</u>			
(13) OCCUPATION <u>Farming</u>	(18) BIRTHPLACE <u>Greenville, Co</u>			
(20) Number of children born to mother, including present birth <u>One</u>	(19) OCCUPATION <u>Housework</u>			
(21) Number of children of this mother now living, including present birth <u>One</u>	(22) Number of children of this mother now living, including present birth <u>One</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 8 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jas. A. Thomason
 (24) State whether Physician or Midwife: Physician (25) Address of Physician or Midwife: Ft Inm S.C.

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Feb 10 1916 (28) J. B. Tucker 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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