

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.

McGraw-Hill of Columbia

W. E. N. 7

McGraw-Hill

(1) PLACE OF BIRTH

County of Charleston
Township of St. James
Inc. Town of McClaurie
City of McClaurie

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
45655

Registration District No. 906 Registered No. 6
St. SINGLETON (For use of Local Registrar)
Ward St.
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Solomon Washington If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 2 (6) Are Parents Married? No (7) DATE OF BIRTH Jan 5 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Solomon Washington
(9) PRESENT POSTOFFICE OF FATHER Sautee
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 33 (Years)
(12) BIRTHPLACE Sautee
(13) OCCUPATION Waitman
(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Betty Singleton
(15) PRESENT POSTOFFICE OF MOTHER McClaurie
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 23 (Years)
(18) BIRTHPLACE McClaurie
(19) OCCUPATION Farm Laborer
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive 10 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dr. M. M. M. M.
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife McClaurie

Given name added from a supplemental report
....., 191.....
.....
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Jan 11 1916 (28) Geo E. Beaman 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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