

FORM NO. 10. MARGIN RESERVED FOR FILING.

WHEN FILING, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 5. 2.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child. To mark the
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 McCaw, of Columbia

(1) PLACE OF BIRTH

County of Abbeville

Township of One west

Inc. Town of

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

45129

Registration District No. 104

Registered No. 3

(For use of Local Registrar)

(No. Calhoun St.; Calhoun Ward)

(2) Full Name of Child Tracie Black

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

(3) BOY OR GIRL? <u>boy</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>no</u>	(7) DATE OF BIRTH <u>Jan, 12, 6</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Booklet Black

(9) PRESENT POSTOFFICE OF FATHER Haven Path S.C.

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 25 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Jennie Lou Calhoun

(15) PRESENT POSTOFFICE OF MOTHER Haven Path S.C.

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 20 (Years)

(18) BIRTHPLACE Abb. Co.

(19) OCCUPATION Fire Dept.

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) H. S. T. Town

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Uncle, Haven Path S.C. R.F.D.

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 20 6 1916 (28) J. C. Tribble, Jr. Local Registrar

*When there was no attending physician or midwife then the father, household, 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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