

FORM 100-10
 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.
 McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Greenville

Township of Lawrence

Inc. Town of Paulsboro

City of Paulsboro

(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

85818

Registration District No. 2209

Registered No. 539

(For use of Local Registrar)

St.; 11-2nd St. Ward

(2) Full Name of Child

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

(3) SEX OR GENDER Male

(4) Twin or Triplet? Yes

(5) Number in order of birth 1

(6) Are Parents Married? Yes

(7) DATE OF BIRTH 11. 3. 21

(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME John Langston

(14) NAME BEFORE MARRIAGE Minnie Rogers

(9) PRESENT POSTOFFICE OF FATHER Paulsboro

(15) PRESENT POSTOFFICE OF MOTHER Paulsboro

(10) COLOR OR RACE W

(11) AGE AT LAST BIRTHDAY 41

(Years)

(16) COLOR OR RACE W

(17) AGE AT LAST BIRTHDAY 32

(Years)

(12) BIRTHPLACE SC

(18) BIRTHPLACE SC

(13) OCCUPATION Mill

(19) OCCUPATION house

(20) Number of children born to mother, including present birth 11

(21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) J. B. [Signature]

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Physician Greenville

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 Nov 13 1921

(28) 191

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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