

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.

State of Columbia.

(1) PLACE OF BIRTH

County of BeaufortTownship of Hiltonheador
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

58778

Registration District No. 602Registered No. 13

(For use of Local Registrar)

(2) Full Name of Child Joseph H. Walters Jr.

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in event of twins or triplets

(6) Are Parents Married? Yes(7) DATE OF BIRTH Feb. 20, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Isaiah Walters

(9) PRESENT POSTOFFICE OF FATHER

Hiltonhead S.C.

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

24
(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Farmer

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

1

MOTHER.

(14) NAME BEFORE MARRIAGE

Julia Lanyer

(15) PRESENT POSTOFFICE OF MOTHER

Hiltonhead S.C.

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

20
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Farm Laborer

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive 9 P. M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) T. H. Lanyer

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

MidwifeHiltonhead S.C.

Given name added from a supplemental report

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Registrar

(26) Witness

W. D. Brown
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed June 2, 1916

(28)

W. D. Brown

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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