

## (1) PLACE OF BIRTH

County of Beaufort  
 Township of Beaufort  
 or  
 Inc. Town of .....  
 or  
 City of ..... (No. .... St.; ..... Ward)  
 (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

58755

(2) Full Name of Child Julia Bird

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE BIRTH April 10, 1916  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Edster Bird(9) PRESENT POSTOFFICE OF FATHER Port Royal, S.C.(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 32 (Years)(12) BIRTHPLACE Colleton County(13) OCCUPATION Laborer(20) Number of children born to mother, including present birth 3

## MOTHER.

(14) NAME BEFORE MARRIAGE Katie L. Primus(15) PRESENT POSTOFFICE OF MOTHER Port Royal, S.C.(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 25 (Years)(18) BIRTHPLACE Hampton County(19) OCCUPATION House wife(21) Number of children of this mother now living, including present birth 3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 2:00 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Annie Branch(24) State whether Physician or Midwife (25) Address of Physician or Midwife Midwife

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 4-22-1916 (28) M. B. Cope 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.

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.

McCaw, of Columbia.