

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.

Cav. of Colum.

(1) PLACE OF BIRTH

County of Berkley
 Township of 2nd St. Johns
 or
 Inc. Town of
 or
 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

48,110

Registration District No. 702 Registered No. 19
 (For use of Local Registrar)

(2) Full Name of Child Lucinda Manigault ... If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl

(4) Twin or triplet?

(5) Number in order of birth

To be answered only in event of twins or triplets

(6) Are Parent Married? Yes(7) DATE OF BIRTH Feb 15 1916
(Name of Month) (Day) (Year)

FATHER.

(3) FULL NAME Shadwell Manigault(9) PRESENT POSTOFFICE OF FATHER Moncks Corner S.C.(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 46 (Years)(12) BIRTHPLACE Berkley Co(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 10

MOTHER.

(14) NAME BEFORE MARRIAGE Rose Manigault(15) PRESENT POSTOFFICE OF MOTHER Moncks Corner S.C.(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 36 (Years)(18) BIRTHPLACE Berkley Co(19) OCCUPATION Farming(21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born alive at 4:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Samuel S. Manigault

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Moncks Corner S.C.(26) Witness E. J. Hamilton (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Feb 24 1916 (28) H. L. Cain 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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