

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.

City of Columbia

(1) PLACE OF BIRTH

County of LaurensTownship of YoungsInc. Town of YoungsCity of Youngs

(if birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Janethy Matilda Inovis

File No.—For State Registrar Only

46735

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 2908Registered No. 1
(For use of Local Registrar)(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth 10(6) Are Parents Married? yes(7) DATE OF BIRTH Jan. 7
(Name of Month) (Day) (Year)

To be answered only in case of Twins or Triplets

FATHER.

(8) FULL NAME Marion Francis Inovis(9) PRESENT POSTOFFICE OF FATHER Ft Linn S.C.(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 44
(Years)(12) BIRTHPLACE Madison Co. N.C.(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 10

MOTHER.

(14) NAME BEFORE MARRIAGE Samuelly Matilda Brown(15) PRESENT POSTOFFICE OF MOTHER Ft Linn S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 41
(Years)(18) BIRTHPLACE Laurens Co.(19) OCCUPATION Housework(20) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 9:00 A.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Jas A. Thompson

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

Physician Ft Linn S.C.

Given name added from a supplemental report

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Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Feb 14 191 (28) R. H. Harris
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.