

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.

(1) PLACE OF BIRTH
County of York
Township of Buddick Creek
or
Inc. Town of Registration District No. 4402 Registered No. 101
(For use of Local Registrar)
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

15017

(2) Full Name of Child Edward Lee Hornum } 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 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 26 1911
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Hornum
(9) PRESENT POSTOFFICE OF FATHER Buddick Creek
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 44 (Years)
(12) BIRTHPLACE York Co. S.C.
(13) OCCUPATION Farming
(14) Number of children born to mother, including present birth 15

MOTHER.

(14) NAME BEFORE MARRIAGE James Campbell
(15) PRESENT POSTOFFICE OF MOTHER Buddick Creek
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24 (Years)
(18) BIRTHPLACE York Co. S.C.
(19) OCCUPATION Housewife
(20) Number of children of this mother now living, including present birth 15

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature)
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Buddick Creek

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 Jan. 26 1911 (28) J. C. Hornum 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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