

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. McCaw, of Columbia.

(1) PLACE OF BIRTH
County of Charleston
Township of
or
Inc. Town of Mt. Pleasant
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
76067

Registration District No. 9 B Registered No. 49
(For use of Local Registrar)

(2) Full Name of Child Carrie Spann { 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 (6) Are Parents Married? no (7) DATE OF BIRTH Sept 20, 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME James Mickey
(9) PRESENT POSTOFFICE OF FATHER Mount Pleasant
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 24 (Years)
(12) BIRTHPLACE Mt Pleasant S.C.
(13) OCCUPATION Boatman
(20) Number of children born to mother, including present birth { 1

MOTHER.
(14) NAME BEFORE MARRIAGE Carrie Spann
(15) PRESENT POSTOFFICE OF MOTHER Mt Pleasant
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 22 (Years)
(18) BIRTHPLACE Mt Pleasant S.C.
(19) OCCUPATION Cook
(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 alive at 7 P.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Paider Johnson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Mt. Pleasant

Given name added from a supplemental report
....., 191.....
Registrar

(26) Witness Geo. H. Roberts
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Sept 20 1916 (28) Geo. H. Roberts 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.