

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 Lomburg

Township of King

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

81111

Registration District No. 4302

Registered No. 110
(For use of Local Registrar)

(2) Full Name of Child Ella Washington

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? Yes

(7) DATE OF BIRTH Nov. 18, 1914
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Ben Washington

(14) NAME BEFORE MARRIAGE Minnie Graham

(9) PRESENT POSTOFFICE OF FATHER Fowler

(15) PRESENT POSTOFFICE OF MOTHER Fowler

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 34 (Years)

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE Lomburg

(18) BIRTHPLACE Lomburg

(13) OCCUPATION Farmer

(19) OCCUPATION Housekeeper

(20) Number of children born to mother, including present birth 7

(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 H. A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Satyrus C. Edwards

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

Given name added from a supplemental report

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

(27) Filed Nov 21, 1914 (28) B. B. Johnson 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.