

Form No. 10. MARGEN, RESERVED FOR HANDING  
WRITE PLAINLY, WITH ENFADING 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 Columbia

(1) PLACE OF BIRTH

County of Aiken

Township of Millbrook

or  
Inc. Town of  
or  
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

58330

Registration District No. 207

Registered No. 32

(For use of Local Registrar)

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

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

(3) BOY OR GIRL Girl (4) Twin or triplet? Single (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH April 28 1911  
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Joy Bland

(9) PRESENT POSTOFFICE OF FATHER Aiken SC

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 26 (Years)

(12) BIRTHPLACE Aiken CO

(13) OCCUPATION Laborer

(20) Number of children born to mother, including present birth 1

MOTHER

(14) NAME BEFORE MARRIAGE Lillie Calhoun

(15) PRESENT POSTOFFICE OF MOTHER Aiken SC

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 21 (Years)

(18) BIRTHPLACE Aiken CO

(19) OCCUPATION Housewife

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

(23) (Signature) Jane Calhoun

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

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 May 4 1911 (28) J. A. Cook 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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