

FORM NO. 10. MARGIN RESERVED FOR INDEXING. PRINTED IN PERMANENT INK—THIS IS A PERMANENT RECORD. WRITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 8.

(1) PLACE OF BIRTH
County of Bulletin
Township of Indian
or
Inc. Town of
or
City of
(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
45924

Registration District No. 1409 Registered No. 1
(For use of Local Registrar)
St. : Ward)
If child is not yet named, make supplemental report as directed

(2) Full Name of Child

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parent Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan. 2</u> 191 <u>6</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Chris Magwood</u>			(14) NAME BEFORE MARRIAGE <u>Belle Haynes</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Walterboro, S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Walterboro, S.C.</u>	
(10) COLOR OR RACE <u>Black</u>			(16) AGE AT LAST BIRTHDAY <u>25</u> (Years)	
(11) AGE AT LAST BIRTHDAY <u>35</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>25</u> (Years)	
(12) BIRTHPLACE <u>Bulletin Co. S. C.</u>			(18) BIRTHPLACE <u>Bulletin Co. S. C.</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Domestic</u>	
(20) Number of children born to mother, including present birth <u>6</u>			(21) Number of children of this mother now living, including present birth <u>4</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 P. M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) Chris Magwood

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Walterboro, S.C.

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

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) William Y. Badgett

(27) Filed Jan 10 1916 (28) William Y. Badgett 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.

Registrar I V Local Registrar V

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