

FORM NO. 10
 THIS SPACE IS RESERVED FOR THE REGISTRATION OF TWINS OR TRIPLETS
 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 **CERTIFICATE OF BIRTH**
 County of Sumter STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 Township of Waynesville State Board of Health
 or
 Inc. Town of Registration District No. 4102 Registered No. 107
 or
 City of (No.) (For use of Local Registrar)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.) St.; Ward

File No.—For State Registrar Only
44769

(2) Full Name of Child James Johnson } 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 Dec 2 1918
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jim Johnson

(9) PRESENT POSTOFFICE OF FATHER Waynesville

(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 32 (Years)

(12) BIRTHPLACE Waynesville

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1/2

MOTHER.

(14) NAME BEFORE MARRIAGE Mattie Cooper

(15) PRESENT POSTOFFICE OF MOTHER Waynesville

(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 35 (Years)

(18) BIRTHPLACE Waynesville

(19) OCCUPATION Farmer

(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 5 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rose Hampton
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Waynesville, S.C.

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 Dec 5 1918 (28) W. J. Thomas Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before fifth month of pregnancy.

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