

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. THIS OVIUM, No. 2, etc., in question 5.
 Calw. of Columbia.

(1) PLACE OF BIRTH
 County of Greenville
 Township of Dunklin
 or
 Inc. Town of
 or
 City of (No.)
 (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
56052

Registration District No. 2205 Registered No. 222
 (For use of Local Registrar)

(2) Full Name of Child Emory Eugene Scales { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? X (5) Number in order of birth 10 (6) Are Parents Married? Yes (7) DATE OF BIRTH April 6th 1906
 (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Joe Scales
 (9) PRESENT POSTOFFICE OF FATHER Loney Creek S.C.
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 38 (Years)
 (12) BIRTHPLACE Grille Co. So. Car.
 (13) OCCUPATION Farm Laborer
 (20) Number of children born to mother, including present birth { 10

MOTHER
 (14) NAME BEFORE MARRIAGE Clara Borking
 (15) PRESENT POSTOFFICE OF MOTHER Loney Creek S.C.
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 30 (Years)
 (18) BIRTHPLACE Grille Co. So. Car.
 (19) OCCUPATION Farm Laborer
 (21) Number of children of this mother now living, including present birth { 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 9:15 A.M. on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) J. P. Knight, M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife R. 5 Honey Path, S.C.

Given name added from a supplemental report
 1st
 Registrar

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
 (27) Filed Apr 10 1906 (28) C. D. Smith 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.

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.