

Form No. 10. MARGIN RESERVED FOR BINDING. WHITE PAPER, 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. McCray, of Columbia.

(1) PLACE OF BIRTH

County of

Township of

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

70581

Registration District No. 4103

Registered No. 42

(For use of Local Registrar)

(2) Full Name of Child

Ellen Butler McBride

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

To be answered only in event of Twins or Triplets

(6) Are Parents Married? No

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Tom Butler

(9) PRESENT POSTOFFICE OF FATHER

Hedgefield SC

(10) COLOR OR RACE

Cel

(11) AGE AT LAST BIRTHDAY

18 (Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Labourer

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

1

MOTHER.

(14) NAME BEFORE MARRIAGE

Bertha McBride

(15) PRESENT POSTOFFICE OF MOTHER

Hedgefield SC

(16) COLOR OR RACE

Cel

(17) AGE AT LAST BIRTHDAY

18 (Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Labourer

(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 born at 12 M., on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature)

Ellen Haynesworth

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife

Hedgefield

M.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

July 9, 1916

(28)

M. L. Barber M. G.

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.