

Form No. 10. MARKING INFORMATION FROM BIRTHING. WRITTEN PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. 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. City of Columbia.

(1) PLACE OF BIRTH Cherry
 County of Rock
 Township of Ross
 or
 Inc. Town of Registration District No. 110.7 Registered No. 8
 or
 City of (No. 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 Maggie Belle Barty { If child is not yet named, make supplemental report as directed

File No.—For State Registrar Only
48553

(3) BOY OR GIRL? As (4) Twin or Triplet? 2 (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH 2 25 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Thomas Barty
 (9) PRESENT POSTOFFICE OF FATHER Blackstock SC
 (10) COLOR OR RACE B (11) AGE AT LAST BIRTHDAY 36 (Years)
 (12) BIRTHPLACE Cherry Co. SC
 (13) OCCUPATION Laborer on Farm
 (14) Number of children born to mother, including present birth Three

MOTHER.

(14) NAME BEFORE MARRIAGE Cressie Moore
 (15) PRESENT POSTOFFICE OF MOTHER Blackstock SC
 (16) COLOR OR RACE B (17) AGE AT LAST BIRTHDAY 29 (Years)
 (18) BIRTHPLACE Cherry Co. SC
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born alive (Hour A. M. or P. M.) 7 1 P. M. on the date above stated.
 (23) (Signature) Caroline T. McCreary
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Blackstock SC
 Given name added from a supplemental report W. J. Anderson
 (26) Witness (Signature of Witness necessary only when question 22 is signed by clerk) W. J. Anderson
 (27) Filed Feb. 1916 (28) H. H. Vassalor 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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