

FORM NO. 10. MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. No. 3.—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. McCaw, of Columbia.

(1) PLACE OF BIRTH  
 County of York  
 Township of Beulah  
 or  
 Inc. Town of Rock Hill  
 or  
 City of RFD #3 (No. .... St.; .... Ward)  
 (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  
**50779**

(2) Full Name of Child Bert Lataker { 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 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 29, 1916  
In regard only in case of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Lynn Lataker  
 (9) PRESENT POSTOFFICE OF FATHER Rock Hill S.C. #3  
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 36 (Years)  
 (12) BIRTHPLACE S.C.  
 (13) OCCUPATION Farm (Lumber)  
 (20) Number of children born to mother, including present birth 11

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Hettie Jennings  
 (15) PRESENT POSTOFFICE OF MOTHER Rock Hill S.C. #3  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 33 (Years)  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION Launesswork  
 (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 11:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)  
 (23) (Signature) [Signature]  
 (24) State whether Physician or Midwife Mid. (25) Address of Physician or Midwife McCaw, of Columbia

Given name added from a supplemental report ..... 191....  
 Registrar  
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark) S. H. Love  
 (27) Filed Mar 6 1916 (28) 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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