

Form No. 10. NEVER BE REVERSED FOR FILING. WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. N. E.—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

County of

Township of

or  
Inc. Town of

City of

(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

71808

Registration District No. 904 Registered No. 77  
(For use of Local Registrar)

(2) Full Name of Child. Martha Champaign

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 (6) Are Parents Married? yes (7) DATE OF BIRTH August 18 1916  
(Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME Richard Champaign

(9) PRESENT POSTOFFICE OF FATHER Gas field

(10) COLOR OR RACE Blk (11) AGE AT LAST BIRTHDAY 24 (Years)

(12) BIRTHPLACE Gas field

(13) OCCUPATION Farmer

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

**MOTHER.**

(14) NAME BEFORE MARRIAGE Virginia Brown

(15) PRESENT POSTOFFICE OF MOTHER Gas field

(16) COLOR OR RACE Blk (17) AGE AT LAST BIRTHDAY 24 (Years)

(18) BIRTHPLACE Gas field

(19) OCCUPATION house wife

(21) Number of children of this mother now living, including present birth 2

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

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

(23) (Signature) A. Richard Champaign

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Parent R. Champaign

Given name added from a supplemental report

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

1916  
Geo. R. Seabrook Registrar

(27) Filed August 21 1916 (28) R. F. Crumhall 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.