

(1) PLACE OF BIRTH

County of GreeneTownship of IndeavourInc. Town of IndeavourCity of Indeavour

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child James Russell

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 ✓(6) Are Parents Married? ✓(7) DATE OF BIRTH June 17

(Month of Month) (Day) (Year)

FATHER

(8) FULL NAME Geo Russell(9) PRESENT POSTOFFICE OF FATHER Indeavour(10) COLOR OR RACE Wego(11) AGE AT LAST BIRTHDAY 22

(Years)

(12) BIRTHPLACE Richland Co(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 1

MOTHER

(15) NAME BEFORE MARRIAGE Ella Lawrence(16) PRESENT POSTOFFICE OF MOTHER Indeavour(17) COLOR OR RACE Wego(18) AGE AT LAST BIRTHDAY 16

(Years)

(19) BIRTHPLACE Richland SC(20) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth None

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at Indeavour on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Walter S. Smith(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Indeavour

Given name added from a supplemental report

(26) Witness Walter S. Smith

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

(27) Date June 18 1910(28) Local Registrar Walter S. Smith

When there was no physician or midwife present, then the father, householder, etc., should make this return. If child breathed even once, it must be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

MARGIN RESERVED FOR BINDING.

WRITE 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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. For South Carolina
64382Township of IndeavourInc. Town of IndeavourCity of Indeavour

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