

FORM NO. 10—MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, 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.

McCaw, of Columbia

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only
542

County of Charleston
 Township of Charleston
 or
 Inc. Town of Charleston Registration District No. 122
 or
 City of Charleston (No. Pop. Hospital St. St. Ward) (If birth occurs in a hospital or other institution, give name of street and number.)

(2) Full Name of Child. Baby Shelton If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Age at Birth 1 yr (7) DATE OF BIRTH July 29 22
To be answered only in case of twins or triplets. (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Edison Atterton Shelton
 (9) PRESENT POSTOFFICE OF FATHER Charleston, SC
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 42 (Years)
 (12) BIRTHPLACE Madison, Ga
 (13) OCCUPATION Auto Fitter
 (20) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Miss Elizabeth Wiles
 (15) PRESENT POSTOFFICE OF MOTHER Charleston, SC
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 40 (Years)
 (18) BIRTHPLACE Allanta, Georgia
 (19) OCCUPATION Domestic
 (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 alive at 5:00 P. M. (Born alive or stillborn) (Hour, A. M. or P. M.)
 on the date above stated.

(23) (Signature) George Atterton
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Charleston SC

Given name added from a supplemental report _____ 191__
 _____ Registrar

(23) Witness _____
 (Signature of Witness necessary only when question 23 is signed by mark.)
 (27) Filed 1-30-1922 (28) J. Morris Green, Jr. 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.