

Form No. 10. MARGIN RESERVED FOR INDEXING. 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.

(1) PLACE OF BIRTH
 County of Winthrop
 Township of Ridge
 or
 Inc. Town of
 or
 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
50727

Registration District No. 4319 Registered No. 9
 (For use of Local Registrar)

(2) Full Name of Child Louise Speight { 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) Are Parents Married? No (7) DATE OF BIRTH Feb, 1916
 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Sam Gaskin</u>	(14) NAME BEFORE MARRIAGE <u>Rose Speight</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Lee, S. C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Lee, S. C.</u>
(10) COLOR OR RACE <u>Colored</u>	(11) AGE AT LAST BIRTHDAY <u>20</u> (Years)	(16) COLOR OR RACE <u>Colored</u>	(17) AGE AT LAST BIRTHDAY <u>17</u> (Years)
(12) BIRTHPLACE <u>Williamburg</u>	(18) BIRTHPLACE <u>Williamburg, Va</u>	(13) OCCUPATION <u>On Farm</u>	(19) OCCUPATION <u>On Farm</u>
(20) Number of children born to mother, including present birth <u>1</u>	(21) Number of children of this mother now living, including present birth <u>1</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Miss Carrie Gaskin

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Lee, R. X 1 Box 66

Given name added from a supplemental report
 191.....
 Registrar

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

(27) Filed Feb. 17 1916 (28) R. F. Speight 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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