

Form No. 10.

MARGIN RESERVED FOR FILING.

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

County of Charleston

Township of

or
Inc. Town of Goffneyor
City of

(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

45638

Registration District No. 10a Registered No. 6

(For use of Local Registrar)

St.; Ward)

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>No</u> <small>To be answered only in case of Twins or Triplets</small>	(5) Number in order of birth <u>6</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan. 11, 1914</u> <small>(Name of Month) (Day) (Year)</small>
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FATHER.

MOTHER.

(8) FULL NAME Osceola Brown(14) NAME BEFORE MARRIAGE Marion Holmes(9) PRESENT POSTOFFICE OF FATHER Goffney S.C.(15) PRESENT POSTOFFICE OF MOTHER Goffney S.C.(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 39 (Years)(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 28 (Years)(12) BIRTHPLACE Goffney S.C.(18) BIRTHPLACE Goffney(13) OCCUPATION Shoemaker(19) OCCUPATION Laundry(20) Number of children born to mother, including present birth 6(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 4 P M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Mattie Smith(24) State whether Physician or Midwife (25) Address of Physician or Midwife Med

Given name added from a supplemental report

(26) Witness Amie Manning
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed 1/12/14 1914 (28) M. S. Smith
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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