

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 Cherokee
Township of _____
or
Inc. Town of Gaffney
or
City of _____

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. 10^a 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 Boy (4) Twin or Triplet? _____ (5) Number in order of birth 6 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan, 11 1911
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Osceola Brown
(9) PRESENT POSTOFFICE OF FATHER Gaffney S.C.
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 39 (Years)
(12) BIRTHPLACE Gaffney S.C.
(13) OCCUPATION Shoemaker
(20) Number of children born to mother, including present birth { 6

MOTHER.
(14) NAME BEFORE MARRIAGE Marion Holman
(15) PRESENT POSTOFFICE OF MOTHER Gaffney S.C.
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 78 (Years)
(18) BIRTHPLACE Gaffney
(19) OCCUPATION Laundry
(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
_____, 191____

Registrar

(26) Witness Anna E. Manning
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 1/12/11 191____ (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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