

FORM NO. 10. MARGIN RESERVED FOR INDEXING. WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD. M. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the 1st, 2nd, 3rd, etc., in question 8.

(1) PLACE OF BIRTH

County of

Bamberg

Township of

Beauf. Bridge

Inc. Town of

City of

(No. of 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

48075

Registration District No.

401

Registered No.

14

(For use of Local Registrar)

2) Full Name of Child

Estella Collins

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

girl

(4) Twin or triplet?

To be answered only in case of twins or triplets

(5) Number in order of birth

8

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Jan. 16

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

William Collins

(9) PRESENT POSTOFFICE OF FATHER

Govan, S.C.

(10) COLOR OR RACE

negro

(11) AGE AT LAST BIRTHDAY

25

(Years)

(12) BIRTHPLACE

Bamberg, Govan S.C.

(13) OCCUPATION

Farmer

(14) Number of children born to mother, including present birth

8

MOTHER.

(14) NAME BEFORE MARRIAGE

Sarah Saxon

(15) PRESENT POSTOFFICE OF MOTHER

Govan, S.C.

(16) COLOR OR RACE

negro

(17) AGE AT LAST BIRTHDAY

22

(Years)

(18) BIRTHPLACE

Govan, S.C.

(19) OCCUPATION

Housewife + farm laborer

(20) Number of children of this mother now living, including present birth

8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was

alive

at

5 A.M.

(Born alive or stillborn)

(Hour A. M. or P. M.)

on the date above stated.

(23) (Signature)

W. A. Hutzog

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

midwife

at Govan, S.C.

Given name added from a supplemental report

191....

Registrar

(26) Witness

W. A. Hutzog

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

(27) Filed

191....

(28)

CR Ray

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.

A child which breathes even once, must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.