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.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
41357

(1) PLACE OF BIRTH

County of Abbeville

Township of Abbeville

or

Inc. Town of ..... Registration District No. 100 Registered No. 69 (For use of Local Reistrar)

or

City of Abbeville (No. ..... St.; ..... Ward)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(3) [redacted] OR GIRL?

(4) Twin or Triplet? (5) Number in order of birth — To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes

(7) DATE OF BIRTH Dec. 21, 1915 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME Joe Walker	(14) NAME BEFORE MARRIAGE Lula Hasard
(9) PRESENT POSTOFFICE OF FATHER Abbeville	(15) PRESENT POSTOFFICE OF MOTHER Abbeville
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 4 (Years)	(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY about 35 (Years)
(12) BIRTHPLACE Abbeville	(18) BIRTHPLACE Abbeville
(13) OCCUPATION Farming	(19) OCCUPATION Farming
(20) Number of children born to mother, including present birth { Thirteen	(21) Number of children of this mother now living, including present birth { Ten

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Forneber at 7 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) .....

(24) State whether Physician or Midwife Rosette Brooks midwife

(25) Address of Physician or Midwife Abbeville Co

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 Dec 26 1915. (28) ..... 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.

McCaw, of Columbia.

*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.