

EARLY COUNTY

BIRTH RECORDS

FATHER'S NAMEBABY'S NAMEDATE

Webb, Hardy

no name

Apr. 30, 1876

Wells, Newery

no name

Apr. 12, 1876

Unknown

no name

Mar. 31, 1876

FORM A.

Return of a Birth.

To the Ordinary of

Early

County, State of Georgia.

- | | |
|---|---------------------------------------|
| 1. Date of birth..... | 1. <i>30th April</i> |
| 2. Full name of child, if living..... | 2. |
| 3. Sex—No. of child of mother..... | 3. <i>Male 1st Child</i> |
| 4. Color..... | 4. <i>Black</i> |
| 5. Place of birth—(city or country)..... | 5. <i>Early County</i> |
| 6. If premature, period of utero-gestation..... | 6. |
| 7. Cause of miscarriage..... | 7. |
| 8. Condition of mother subsequent to miscarriage.. | 8. |
| 9. Full name of mother—(maiden name)..... | 9. <i>Ann M. Pullen</i> |
| 10. Mother's birthplace and age..... | 10. <i>Geo Age 20 years</i> |
| 11. Mother's residence..... | 11. <i>Early County</i> |
| 12. Full name of father—(if illegitimate, so state).. | 12. <i>Hardy Webb</i> <i>im</i> |
| 13. Father's birthplace and age..... | 13. <i>Geo Age 22 years</i> |

I hereby certify that the above is a true return of the birth of *Hardy Webb* &

Ann Webb's Child

who was born on the *30th*

day of *April*

187*6*

Early

County, Ga.

W. H. McElain M.D.

FORM A.

Return of a Birth. 2

To the Ordinary of *Early* County, State of Georgia.

- | | |
|--|---|
| 1. Date of birth..... | 1. <i>12th April</i> |
| 2. Full name of child, if living | 2. |
| 3. Sex—No. of child of mother..... | 3. <i>Male 1st child</i> |
| 4. Color | 4. <i>Black</i> |
| 5. Place of birth—(city or country)..... | 5. <i>Baker County</i> |
| 6. If premature, period of utero-gestation..... | 6. |
| 7. Cause of miscarriage..... | 7. |
| 8. Condition of mother subsequent to miscarriage..... | 8. |
| 9. Full name of mother—(maiden name)..... | 9. <i>Sarah Jane Densler</i> |
| 10. Mother's birthplace and age..... | 10. <i>Geo 15 years</i> |
| 11. Mother's residence | 11. <i>Baker County</i> |
| 12. Full name of father—(if illegitimate, so state)..... | 12. <i>Nevoy Wells (Illegitimate)</i> |
| 13. Father's birthplace and age..... | 13. <i>Geo Age 21 years</i> |

I hereby certify that the above is a true return of the birth of *Nevoy Wells & Sarah J Densler child* who was born on the *12th* day of *April*

1876

Early

County, Ga.

W. R. McClain M.D.

FORM A

Return of a Birth. 3

To the Ordinary of *Early* County, State of Georgia.

- | | |
|--|-------------------------------------|
| 1. Date of birth..... | 1. <i>31 March 1876</i> |
| 2. Full name of child, if living..... | 2. |
| 3. Sex—No. of child of mother..... | 3. <i>Female</i> |
| 4. Color..... | 4. <i>Mulatto</i> |
| 5. Place of birth—(city or country)..... | 5. <i>Blacksburg</i> |
| 6. If premature, period of utero-gestation..... | 6. |
| 7. Cause of miscarriage..... | 7. |
| 8. Condition of mother subsequent to miscarriage.. | 8. |
| 9. Full name of mother—(maiden name)..... | 9. <i>Violet Alexander</i> |
| 10. Mother's birthplace and age..... | 10. <i>Early Co. - age 16 years</i> |
| 11. Mother's residence..... | 11. <i>Early County</i> |
| 12. Full name of father—(if illegitimate, so state)... | 12. <i>Illegitimate</i> |
| 13. Father's birthplace and age..... | 13. <i>not known</i> |

I hereby certify that the above is a true return of the birth of

..... who was born on the *31* day of *March* 187*6*

County, Ga.

John W. Perry