Form No. 1.

(1) PLACE OF BIRTH

County of Lee

Township of Mechanicsville

or

Inc. Town of

or

City of (No. St.; Ward)

(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
90714

Registration District No. 3003. Registered No. 69
(For use of Local Registrar)

(2) Full Name of Child _____ 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 event of Twins or Triplets

(5) Number in order of birth 2

(6) Are Parents Married? yes

(7) DATE OF BIRTH Dec. 20, 1906 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Edd. R. Taylor

(9) PRESENT POSTOFFICE OF FATHER Oswego, S.C.

(10) COLOR OR RACE Negro

(11) AGE AT LAST BIRTHDAY 20 (Years)

(12) BIRTHPLACE Lee Co. S.C.

(13) OCCUPATION Farm Hand

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Aline Boyd

(15) PRESENT POSTOFFICE OF MOTHER Oswego, S.C.

(16) COLOR OR RACE Negro

(17) AGE AT LAST BIRTHDAY 18 (Years)

(18) BIRTHPLACE Lee Co. S.C.

(19) OCCUPATION House Wife

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) at 12 A. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Mary McMillan

(24) State whether Physician or Midwife: Mid wife

(25) Address of Physician or Midwife: Oswego, S.C.

Given name added from a supplemental report _____

_____ 19 ____ Registrar

(26) Witness C. P. Boykin
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 12/28 1906 (28) C. P. Boykin 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, Columbia, S. C.