

Form No. 1

(1) PLACE OF BIRTH

County of Darrell

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Township of Beul Pondor
Inc. Town ofRegistration District No. 5-0-5Registered No. 13

File No.—For State Registrar Only

48124

City of

(No.)

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

(2) Full Name of Child Freddie Annomoth

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) Are Parents Married? Yes(7) DATE OF BIRTH Feb. 14, 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Marion C. (Mrs)(9) PRESENT POSTOFFICE OF FATHER Barton S.C.(10) COLOR OR RACE Black(11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE Atlanta S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Ella Bogler(15) PRESENT POSTOFFICE OF MOTHER Barton S.C.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 21 (Years)(18) BIRTHPLACE Atlanta S.C.(19) OCCUPATION Farmer Wife(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 born alive at 1:00 P. M., on the date above stated. (Hour A.M. or P.M.)(23) (Signature) R. R. Smith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

MidwifeBeul Pond S.C.

Given Name added from a supplemental report

Marion Chest, 191....

Registrar

(26) Witness Marion Chest

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

(27) Filed Feb 17, 1916

(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.

WRITER PLEASE, WITH EMPLOYING THIS IS A FURNISHED BY THE REGISTRAR. IN CASE OF TWINS OR TRIPLETS, SEPARATE BLANK FOR EACH CHILD, AND MAKE THE FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia