

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only  
**74807**

(1) PLACE OF BIRTH  
 County of St. Stephens  
 Township of Kettle Dale  
 or  
 Inc. Town of ..... Registration District No. 4008 Registered No. 636  
 or  
 City of ..... (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 Mary Lou Duckett (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? <u>G</u>	(4) Twin or Triplet? <u>No</u> <small>To be answered only in event of Twins or Triplets</small>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>July 8 1906</u> <small>(Name of Month) (Day) (Year)</small>
(8) FULL NAME OF FATHER <u>L. P. Duckett</u>		(14) NAME BEFORE MARRIAGE <u>Mary Gore</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Glendale SC</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>Glendale SC</u>		
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>33</u> <small>(Years)</small>	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>25</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>N. C.</u>		(18) BIRTHPLACE <u>SC</u>		
(13) OCCUPATION <u>Mill work</u>		(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>5</u>		(21) Number of children of this mother now living, including present birth <u>2</u>		

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was alive at 330 a. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary Harris, Mid.

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report  
Madeline ..... 191....  
McNamee ..... Registrar

(26) Witness .....  
(Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed July 12 1906 (28) E. H. Parker Local Registrar.

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before fifth month of pregnancy.

MARGIN RESERVED FOR BINDING.  
 WRITE MAINLY, 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.  
 McCaw, of Columbia.