

Form No 1.

(1) PLACE OF BIRTH

County of Cherokee

Township of Rough

or
Inc. Town of

or
City of

(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

45866

Registration District No. 1303 Registered No. 85
(For use of Local Registrar)

(2) Full Name of Child Almon Clyde Cole

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 Jan 28 1906
(Name of Month) (Day) (Year)

To be answered only in event of Twin or Triplets

FATHER.

(8) FULL NAME Joe Lucian Cole

(9) PRESENT POSTOFFICE OF FATHER Turkville

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Years)

(12) BIRTHPLACE Atlanta S. C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Kate Turkville

(15) PRESENT POSTOFFICE OF MOTHER Turkville S. C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Years)

(18) BIRTHPLACE Turkville S. C.

(19) OCCUPATION House Keeping

(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive on the date above stated.

(23) (Signature) R. S. A. ...

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

Given name added from a supplemental report

(26) Witness

Signature of Witness

(27) Date

Signature of Registrar

Signature of Registrar

Signature of Registrar

Signature of Registrar

Signature of Registrar

Signature of Registrar

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Signature of Registrar

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.

of Columbia

*If there is any question as to the correctness of the information furnished, the Registrar should make a supplemental report, and a child is not to be registered until the information is correct.