

Form No 1.

(1) PLACE OF BIRTH

County of HamptonTownship of AppleInc. Town of Vernville

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

68879

Registration District No. 2401Registered No. 176

(For use of Local Registrar)

(2) Full Name of Child Patthan Mixson

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy(4) Twin or Triplet? 1(5) Number in order of birth 1(6) Are Parents Married? Yes

(7) DATE OF BIRTH

June 6, 1906

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Fred Mixson

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

40

(Years)

(12) BIRTHPLACE

Grove Field

(13) OCCUPATION

Farmer

(14) Number of children of this father, including present birth

1

MOTHER.

(15) NAME BEFORE MARRIAGE

Elodie Marsh

(16) PRESENT POSTOFFICE OF MOTHER

Vernville

(17) COLOR OR RACE

White

(18) AGE AT LAST BIRTHDAY

18

(Years)

(19) BIRTHPLACE

near Vernville

(20) OCCUPATION

Housekeeping

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 8 o'clock a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

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

Mary J. W. Rogers, midwife

(26) Witness

Margaret Marsh

(Signature of Witness necessary only when question 22 is signed by parent)

(27) Date

June 6, 1906

(28) Signature

J. W. Rogers

When there was no attending physician or midwife, or no one in the household, etc., should make this return. If a child breathes even once, it must not be regarded as stillborn. No report is desired or submitted before the child reaches the age of 24 hours.

MAKING INDIVIDUALS INDIVIDUAL. WITH REFERRING INK—THIS IS A PERMANENT RECORD. 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.

McCOMB of Columbia