

Form No. 1

(1) PLACE OF BIRTH

County of CharlestonTownship of Charleston

Inc. Town of

City of Farmington (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 William EadyFile No.—For State Registrar Only
30823Registration District No. 4601 Registered No. 42
(For use of Local Registrar)

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

(1) SEX OR ONLY <u>Boy</u>	(2) Twin or Triplet <u>OK</u> To be answered only in event of Twin or Triplet	(3) Number in order of birth <u>5</u>	(4) Age in years <u>30</u>	(5) DATE OF BIRTH <u>Oct 20, 1925</u> (Name of Month) (Day) (Year)
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FATHER.

(6) FULL NAME William Eady(7) PRESENT
POST OFFICE
OF FATHER Farmington(8) COLOR
OR
RACE Blk (9) AGE AT LAST
BIRTHDAY 50
(Year)(10) BIRTHPLACE Farmington(11) OCCUPATION Farmington(12) Number of children born to
mother, including present birth 15

MOTHER.

(13) NAME BEFORE
MARRIAGE Julia Pedenbury(14) PRESENT
POST OFFICE
OF MOTHER Farmington(15) COLOR
OR
RACE Blk (16) AGE AT LAST
BIRTHDAY 44
(Year)(17) BIRTHPLACE Farmington(18) OCCUPATION Wife(19) Number of children of this mother
now living, including present birth 18

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(20) I hereby certify that I attended the birth of this child, who was Chloro 9.9
on the date above stated. (Born alive or stillborn) (Born A. M. or P. M.)(21) (Signature) Flora Dorch
(22) State whether Physician or Midwife (23) Address of Physician or Midwife
Midwife FarmingtonGiven name added from a supplement-
tal report(24) Witness
(Signature of Witness necessary only
when question 23 is signed by mark)(25) Date Oct 20, 1925 (26) B. E. Brown
Local RegistrarWhen 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.

THIS FORM IS TO BE FILLED OUT FOR EACH CHILD, and mark the
FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 1.

Division of Statistics, Columbia, S. C.