

(1) PLACE OF BIRTH

County of DillonTownship of HillbornInc. Town of Pages Mill S.C.

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

51954

Registration District No. 1603Registered No. 17

(For use of Local Registrar)

(2) Full Name of Child

HattieAnn

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

(3) BOY OR GIRL

Girl

(4) Twin or Triplet?

(5) Number in order of birth

4

(6) Are Parents Married?

(7) DATE OF BIRTH

Mar 15 1904

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

J. B. Ann

(9) PRESENT POSTOFFICE OF FATHER

Pages Mill S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

41

(Years)

(12) BIRTHPLACE

Marion Co. S.C.

(13) OCCUPATION

Farmer

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

4

MOTHER.

(14) NAME BEFORE MARRIAGE

Mary Rogers

(15) PRESENT POSTOFFICE OF MOTHER

Pages Mill S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

38

(Years)

(18) BIRTHPLACE

Marion Co. S.C.

(19) OCCUPATION

Housewife

(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 as born alive or stillborn on the date above stated.

(Hour) (M.) (P. M.)

(23) (Signature)

J. C. Rogers

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Pages Mill S.C.

Given name added from a supplemental report

Registrar

(26) Witness

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

(27) Filed Mar 15 1904 (28) Local RegistrarH. H. Bailey

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.