

Form No. 1

# CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

No. — For State Registrar Only  
**41433**

## (1) PLACE OF BIRTH

County of Lee  
Township of Mt. Cleo  
or  
Inc. Town of .....  
or  
City of .....

Registration District No. 9084

Registered No. 95  
(For use of Local Registrar)

(2) Full Name of Child Rebecca Abraham  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
St. .... Ward) .....

(3) SEX OF CHILD girl (4) Type of Birth live (5) Number of Births 1  
(6) Are Parents Married yes (7) DATE OF BIRTH Dec 7, 1933  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Wash Abraham  
(9) PRESENT POSTOFFICE OF FATHER St Charles S.C.  
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 43  
(12) BIRTHPLACE Lee Co  
(13) OCCUPATION Farming

MOTHER.  
(14) NAME BEFORE MARRIAGE Honey Clark  
(15) PRESENT POSTOFFICE OF MOTHER St Charles S.C.  
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 29  
(18) BIRTHPLACE Lee  
(19) OCCUPATION House wife  
(20) Number of children of this mother now living, including present birth 10

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child who was born alive at 4 A. M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) Martha Criss(23) State whether Physician or Midwife midwife(24) Address of Physician or Midwife St Charles S.C.

(Given name added from a supplemental report)

(25) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(26) Filed Dec 13, 1933(27) Lawton C. Cline

(28) Local Registrar

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.

WRITE PLAINLY. WITH SPACING. THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN. No. 1. THE OTHER. No. 2. etc. In question 1, RECORD IN COLUMN. Columns 1 & 2.