

(1) PLACE OF BIRTH

County of Chas. S.C.

Township of

or Town of

City of Chas. S.C.

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mildred Smaller

Registered No. 81

(For use of Local Registrar)

Sex of Child girl Date of Birth Jan 27, 1909

FATHER
(1) NAME Abraham Sprule
(2) RESIDENT ADDRESS Chas S.C.
(3) COLOR Col (4) AGE 35
(5) OCCUPATION Chas S.C.
(6) SIGNATURE Chauffer

MOTHER
(1) NAME Mildred P. Blyden
(2) RESIDENT ADDRESS Chas S.C.
(3) COLOR Col (4) AGE 30
(5) OCCUPATION Chas S.C.
(6) SIGNATURE Pomocote

(7) Number of children born to mother, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(29) (Signature) Louisa Washington
(30) State whether Physician or Midwife midwife
(31) Address of Physician or Midwife 13 West St.

Given name added from a supplemental report

(32) Witness (Signature of Witness necessary only when question is raised by local Registrar)
(33) Filed 1/31 (34) Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.

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