

## (1) PLACE OF BIRTH

County of Kershaw  
 Township of Stetson  
 or  
 Inc. Town of.....  
 or  
 City of.....

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No. — For State Registrar Only  
**19116**

Registration District No. 2701 Registered No. 109  
 (For use of Local Registrar)

(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 Mary Stratford { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF

BIRTH June 6, 1911  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Wm. Stratford

(9) PRESENT POSTOFFICE OF FATHER

Cascade

(10) COLOR OR RACE

W.C.

(11) AGE AT LAST BIRTHDAY 40  
 (Years)

(12) BIRTHPLACE

SC

(13) OCCUPATION

Farming

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

9

## MOTHER.

(14) NAME BEFORE MARRIAGE

Mary Stratford

(15) PRESENT POSTOFFICE OF MOTHER

Cascade

(16) COLOR OR RACE

W.C.

(17) AGE AT LAST BIRTHDAY 30  
 (Years)

(18) BIRTHPLACE

SC

(19) OCCUPATION

Housewife

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

9

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was... born alive... at 7 a.m.  
 on the date above stated. (Born alive or stillborn) (Hour M. or P.M.)

(23) (Signature)

Mary E. Harvey

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Stetson

Given name added from a supplemental report

(26) Witness

W. E. Wilson

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

(27) Filed

July 8, 1911

(28)

W. E. Wilson

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.