

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS or TRIPLETS use SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Lancaster
Township of North
or
Inc. Town of Cowards
or
City of Eddie

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

File No.—For State Registrar Only
85642

Registration District No. 2012 Registered No. 102
(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 Eddie Bradley {If child is not yet named, make supplemental report as directed}

(3) BOY OR GIRL <u>boy</u>	(4) Twin or Triplet? <u>one</u>	(5) Number in order of birth <u>4</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Nov 2 1906</u> (Name of Month) (Day) (Year)
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FATHER.
(8) FULL NAME Eddie Bradley
(9) PRESENT POSTOFFICE OF FATHER Scranton Pa.
(10) COLOR OR RACE black (11) AGE AT LAST BIRTHDAY 28 3/4 (Years)
(12) BIRTHPLACE Florence Co
(13) OCCUPATION Farming

MOTHER.
(14) NAME BEFORE MARRIAGE Effie
(15) PRESENT POSTOFFICE OF MOTHER Scranton Pa.
(16) COLOR OR RACE black (17) AGE AT LAST BIRTHDAY 28 (Years)
(18) BIRTHPLACE Florence Co
(19) OCCUPATION Housework
(21) Number of children of this mother now living, including present birth 4

(20) Number of children born to mother, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*
(22) I hereby certify that I attended the birth of this child, who was alive at M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Martha Thompson
(24) State whether Physician or Midwife midwife Address of Physician or Midwife

Given name added from a supplemental report
(26) Witness Dr. Ruffin (Signature of Witness necessary only when question 27 is signed by mark)
(27) Filed 11-4 19 06 (28) A. S. Kelley Local Registrar.

19 06 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.