

Date of Birth 10/10/35 Registration Number 757 Signature [Signature]
 (For use of local Registrar)

Full Name of Child Agatha Blington (If child is not yet named, give name of child)

Sex girl Color White Hair Black Eyes Blue

Father Samuel Blington Mother Serena Callins

Father Wanda Sc Mother Wanda Sc

State Cal County 35

City Berkeley City Berkeley Sc

Occupation Farmer Occupation House Wife

Date of Birth of Child Thirteen Date of Birth of Child Nine

I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) (Day, A. M. or P. M.)

Signature [Signature] Signature [Signature]

Address of Child Wanda Sc