

Form No. 8

(1) PLACE OF BIRTH

County of Union  
 Township of Beaufortville  
 or  
 Inc. Town of Buffalo  
 or  
 City of \_\_\_\_\_

## CERTIFICATE OF BIRTH

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

FILE NO. For State Registrar Only

30417

Registration District No. 423 Registered No. 100  
 (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 Mildred Barkins (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet? \_\_\_\_\_ (5) Number in order of birth \_\_\_\_\_ (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 11 1923  
 (Name of Month) (Day) (Year)  
 To be answered only in event of Twins or Triplets

FATHER  
 (8) FULL NAME Charlie Barkins  
 (9) PRESENT POSTOFFICE OF FATHER Buffalo S.C.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 32  
 (Years)  
 (12) BIRTHPLACE Union Co. S.C.  
 (13) OCCUPATION Fireman  
 (20) Number of children born to mother, including present birth Four

MOTHER Alberdia  
 (14) NAME BEFORE MARRIAGE Alberdia Rockell  
 (15) PRESENT POSTOFFICE OF MOTHER Buffalo S.C.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 21  
 (Years)  
 (18) BIRTHPLACE Union Co. S.C.  
 (19) OCCUPATION Domestic  
 (21) Number of children of this mother, now living, including present birth Three

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 3 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary J. ... (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Buffalo S.C.

Given name above from a supplemental report

L. A. ... M.D.  
126/43  
 Registrar

(26) Witness

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

(27) Filed Oct 10 1923 (28) Joe F. ... 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 28th month of pregnancy.