

(1) PLACE OF BIRTH

County of AlleghenyTownship of Explosion

or

Inc. Town of

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 4608

File No. — For State Registrar Only

139

Registered No. 6

(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

Baby Luciel Maxson

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

To be answered only in event of Twins or Triplets

(Month) (Day) (Year)

FATHER.

(8) FULL NAME

E. R. Maxson

(9) PRESENT POSTOFFICE OF FATHER

Wilmer

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

34
(Years)

(12) BIRTHPLACE

Barnwell Co

(13) OCCUPATION

Farming

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

4

MOTHER.

(14) NAME BEFORE MARRIAGE

Paul Beatrice Brown

(15) PRESENT POSTOFFICE OF MOTHER

Wilmer

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

26
(Years)

(18) BIRTHPLACE

Barnwell Co

(19) OCCUPATION

Housekeeping

(21) Number of children of this mother now living, 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 2 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Salter Beard

(24) State whether Physician or Midwife

midwife

(25) Address of Physician or Midwife

Wilmer

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Jan 29 1912

(28)

J. C. Mayes

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.

USE OF TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 3.