

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No.—For State Registrar Only  
46907

County of *Marlboro*

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

Township of *Red Hill*

Inc. Town of .....

Registration District No. *3307*

Registered No. *6*  
(For use of Local Registrar)

City of ..... (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 *Alberta Dudley* } 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? *No* (7) DATE OF BIRTH *Jan 16 1916*  
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME *Neal Dudley*

(14) NAME BEFORE MARRIAGE *Maggie Hicks*

(9) PRESENT POSTOFFICE OF FATHER *Blenheim*

(15) PRESENT POSTOFFICE OF MOTHER *Blenheim*

(10) COLOR OR RACE *col* (11) AGE AT LAST BIRTHDAY *28*  
(Years)

(16) COLOR OR RACE *col* (17) AGE AT LAST BIRTHDAY *23*  
(Years)

(12) BIRTHPLACE *Marlboro*

(18) BIRTHPLACE *Marlboro*

(13) OCCUPATION *Labour*

(19) OCCUPATION *Labour*

(20) Number of children born to mother, including present birth *6*

(21) Number of children of this mother now living, including present birth *6*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was *alive*, at *3:30* *evening*, on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) *Carolina Brock*

(24) State whether Physician or Midwife | (25) Address of Physician or Midwife  
*mid wife* | *Blenheim*

Given name added from a supplemental report

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

..... 191.....  
Registrar

(27) Filled *Jan 26 1916*. (28) *R. L. Nofier* Local Registrar.

N. B.—In case 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 5.

Caw. of Columbia

\*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.