

Form No. 1.

(1) PLACE OF BIRTH

County of Fairfield

Township of Rockton

Inc. Town of Rockton

City of Rockton

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

46138

Registration District No. 1918 Registered No. 2

(For use of Local Registrar)

St.; ..... Ward)

(2) Full Name of Child Anny Betty Pink If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl

(4) Twin or Triplet? X

Is to be answered only in event of Twins or Triplets

(5) Number in order of birth 1

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Jan 21 1918  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Harry Pink

(9) PRESENT POSTOFFICE OF FATHER Rockton S.C.

(10) COLOR OR RACE white

(11) AGE AT LAST BIRTHDAY 39 (Years)

(12) BIRTHPLACE Fairfield

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Miss Pink

(15) PRESENT POSTOFFICE OF MOTHER Rockton

(16) COLOR OR RACE white

(17) AGE AT LAST BIRTHDAY 39 (Years)

(18) BIRTHPLACE Fairfield

(19) OCCUPATION Farmer

(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) Dr. J. G. Pink

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Rockton S.C.

Given name added from a supplemental report

191...

Registrar

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

(27) Filed Jan 23 1918

(28) J. G. Pink Local Registrar

MARGIN RESERVE FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. 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.

McCaw, 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.