

MAKING REMARKS, FROM BIRTHING.
 COUNTY, WITH UNPAID TAX—THIS IS A REQUIREMENT RECORD.
 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 2.
 OFFICE OF CLERK

(1) PLACE OF BIRTH
 County of Shurtliff
 Township of Shurtliff
 or
 Inc. Town of
 or
 City of
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health
 Registration District No. 1201 Registered No. 11
 (For use of Local Registrar)

File No. — For State Registrar Only
48573

(2) Full Name of Child Rosa Curtis { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Feb 15 1906</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>Tom Curtis</u>			(14) NAME BEFORE MARRIAGE <u>Lula Chapman</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Shurtliff S C</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Shurtliff S C</u>	
(10) COLOR OR RACE <u>Black</u>	(11) AGE AT LAST BIRTHDAY <u>35</u> (Years)	(16) COLOR OR RACE <u>Black</u>	(17) AGE AT LAST BIRTHDAY <u>30</u> (Years)	
(12) BIRTHPLACE <u>Shurtliff S C</u>			(18) BIRTHPLACE <u>Shurtliff S C</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Farmer</u>	
(20) Number of children born to mother, including present birth <u>6</u>			(21) Number of children of this mother now living, including present birth <u>3</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 4 P. M. on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary J. Allen

(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Midwife Mrs. Chapman S C

Given name added from a supplemental report
 190.....

 Registrar

(26) Witness Tom Curtis
 (Signature of Witness necessary only when question 22 is signed by mother)

(27) Filed Feb 20 1906 (28) J. B. Ingram
 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.