

## (1) PLACE OF BIRTH

County of AlbervilleTownship of Dossesor  
Inc. Town ofor  
City of

(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

75343

Registration District No. 105 Registered No. 126  
(For use of Local Registrar)(2) Full Name of Child Irene Adner { 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 Aug. 28, 1906  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME W. F. Adner(9) PRESENT POSTOFFICE OF FATHER Jones Path(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 42  
(Years)(12) BIRTHPLACE Alberville(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth { 12 }

## MOTHER.

(14) NAME BEFORE MARRIAGE Eliza Robinson(15) PRESENT POSTOFFICE OF MOTHER Jones Path(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 41  
(Years)(18) BIRTHPLACE Laurens Co(19) OCCUPATION Dom(21) Number of children of this mother now living, including present birth { 5 }

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Aline at 12 P.M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Eliza Robinson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Jones Path

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 Sept 28, 1906 (28) D. W. Humphreys 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.

MARGIN RESERVED 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.