

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.

(1) PLACE OF BIRTH

County of *Marlboro*
 Township of *Red Hill*
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

73974

Registration District No. *337* Registered No. *5*
 (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 *Leola Dredar* { 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. 19 1906*
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME *Mose Dredar*
 (9) PRESENT POSTOFFICE OF FATHER *Bluehair*
 (10) COLOR OR RACE *col* (11) AGE AT LAST BIRTHDAY *40* (Years)
 (12) BIRTHPLACE *Marlboro*
 (13) OCCUPATION *Farmer*
 (20) Number of children born to mother, including present birth *5*

MOTHER.

(14) NAME BEFORE MARRIAGE *Bessie Thomas*
 (15) PRESENT POSTOFFICE OF MOTHER *Bluehair*
 (16) COLOR OR RACE *col* (17) AGE AT LAST BIRTHDAY *24* (Years)
 (18) BIRTHPLACE *Marlboro*
 (19) OCCUPATION *Labour*
 (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 *alive* at *4 a* M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) *Julia Thomas*

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

Given name added from a supplemental report
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 Registrar

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

(27) Filed *Sept 8 1906* (28) *R. E. Nafziger* 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.