

(1) PLACE OF BIRTH  
County of Edgefield  
Township of Edgefield  
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

32027

Registration District No. .... Registered No. .... 33-  
(For use of Local Registrar)  
St.; ..... Ward)  
(No. .... St.; ..... Ward)  
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**

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 6 (6) Are Parents Married? Yes (7) DATE OF BIRTH July 8 1906  
(Range of Month) (Day) (Year)  
To be answered only in case of Twins or Triplets

**FATHER.**

(8) FULL NAME Wm. E. Eddins  
(9) PRESENT POSTOFFICE OF FATHER Edgefield S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38 (Years)  
(12) BIRTHPLACE Edgefield County  
(13) OCCUPATION Farmer  
(14) Number of children born to mother, including present birth 6

**MOTHER.**

(14) NAME BEFORE MARRIAGE Olga Hamilton  
(15) PRESENT POSTOFFICE OF MOTHER Edgefield S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30 (Years)  
(18) BIRTHPLACE Edgefield County  
(19) OCCUPATION Housewife  
(20) Number of children of this mother now living, including present birth 3

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(21) I hereby certify that I attended the birth of this child, who was born alive at 5 A.M. on the date above stated. (Hour A. M. or P. M.)  
(22) (Signature) D. J. Hunter  
(23) State whether Physician or Midwife Physician (24) Address of Physician or Midwife Edgefield S.C.

Given name added from a supplemental report

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

(26) Filed July 11 1906 (27) Local Registrar D. J. Hunter

When there was no attending physician or midwife, then the father, householder, etc., should make the 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.