

## (1) PLACE OF BIRTH

County of FlorenceTownship of Rockor  
Inc. Town of .....  
or  
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

55842

Registration District No. 2009Registered No. 38

(For use of Local Registrar)

(2) Full Name of Child Allen Stone

{ 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 1(6) Are Parents Married? Yes(7) DATE OF BIRTH Apr - 10 - 6

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Gary D. Stone(9) PRESENT POSTOFFICE OF FATHER Hammaw, SC.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Years)(12) BIRTHPLACE Florence Co(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Edene Barneau(15) PRESENT POSTOFFICE OF MOTHER Hammaw, SC.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 17 (Years)(18) BIRTHPLACE Florence Co(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Alive, at 5 - a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Martha Wise(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Hammaw, SC.

Given name added from a supplemental report

(26) Witnesses .....

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

(27) Filed 4/18/6 (28) R. L. Carter

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.

McCaw, of Columbia. In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and make the FIRST-BORN, No. 1. THE OTHERS, No. 2, etc., in question 2.