

Form No 1.

## (1) PLACE OF BIRTH

County of DillonTownship of HillshoroInc. Town of Lake View S.C.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

64068

Registration District No. 1603 Registered No. 77

(For use of Local Registrar)

St.; ..... Ward)

If child is not yet named, make supplemental report as directed

(2) Full Name of Child Warria Hasals Rogers(3) BOY OR GIRL? Boy(4) Twin or Triplet? ✓(5) Number in order of birth 2(6) Are Parents Married? yes(7) DATE OF BIRTH Jan 29

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Oliver Rogers(9) PRESENT POSTOFFICE OF FATHER Lake View S.C.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 35

(Years)

(12) BIRTHPLACE Ocean Co(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Mary Buehner(15) PRESENT POSTOFFICE OF MOTHER Lake View S.C.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 29

(Years)

(18) BIRTHPLACE Ocean Co(19) OCCUPATION House work(21) 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 born alive at 8:50 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) M. S. ...

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Lake View S.C.

Given name added from a supplemental report

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

(27) Filed July 8, 1911(28) M. S. ... Local Registrar

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 7th month of pregnancy.

MARGIN RESERVES FOR BINDING. WITH UNFOLDING LINE—THIS IS A PERMANENT RECORD. M. S.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1, THE OTHERS, No. 2, etc., in question 5. McCaw of Columbia.