

Form No. 1

(1) PLACE OF BIRTH

County of Greenville
Township of Greenville
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

49577

Registration District No. 2-3-26 Registered No. 5
(For use of Local Registrar)
St.; Ward

(2) Full Name of Child... Mary Reeder { 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 Jan 10 1906
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Abner Reeder
(9) PRESENT POSTOFFICE OF FATHER Greenville
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 40 (Years)
(12) BIRTHPLACE Greenville S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth { 6

MOTHER.
(14) NAME BEFORE MARRIAGE Rosa Reynolds
(15) PRESENT POSTOFFICE OF MOTHER Greenville
(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 33 (Years)
(18) BIRTHPLACE Greenville S.C.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth { 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 7 h. A.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) Katie H. Smith
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

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 Feb 10 1906 (28) S. R. Bandy Local Registrar

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
M.F.—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.
Caw. of Columbia

*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.