

Form No. 1

## (1) PLACE OF BIRTH

County of Sumter **CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 Township of Mayville State Board of Health

File No.—For State Registrar Only

66390

Inc. Town of ..... Registration District No. 4102 Registered No. 63  
 or ..... (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 William Peterson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? Yes (7) DATE OF BIRTH June 8, 1906  
 to be answered only in case of twins or triplets (Name of Month) (Day) (Year)

FATHER.  
 (8) FULL NAME Richard Peterson  
 (9) PRESENT POSTOFFICE OF FATHER Atkins S.C.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 31 (Years)  
 (12) BIRTHPLACE S.C.  
 (13) OCCUPATION Farmer  
 (14) Number of children born to mother, including present birth 4

MOTHER.  
 (14) NAME BEFORE MARRIAGE Lizzie Robinson  
 (15) PRESENT POSTOFFICE OF MOTHER Atkins S.C.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28 (Years)  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION House Wife  
 (21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at Atkins S.C. at 6:30 P.M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) L. W. J. (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Mayville S.C.

Given name added from a supplemental report

(26) Witness ..... (Signature of Witness necessary only when question 22 is signed by mark.)

(27) Filed June 10, 1906 (28) L. W. J. Local Registrar

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