

1) PLACE OF BIRTH

County of CharlestonTownship of MidwayInc. Town of KingstreeCity of Kingstree, S.C. (No. Railroad Avenue St.; Ward)
(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

66550

2) Full Name of Child Amos Francis Burger Registration District No. 43 A Registered No. 6
(For use of Local Registrar)
If child is not yet named, make supplemental report as directed(1) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH June 4th 1906
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Amos Francis Burger(9) PRESENT POSTOFFICE OF FATHER Kingstree(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 35 (Years)(12) BIRTHPLACE Wongons.(13) OCCUPATION (S.C. Elec. & Ice Co.)
Delivering ice.(14) Number of children born to mother, including present birth Five

MOTHER.

(14) NAME BEFORE MARRIAGE Doc McFadden(15) PRESENT POSTOFFICE OF MOTHER Kingstree, S.C.(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 24 (Years)(18) BIRTHPLACE Wongons.(19) OCCUPATION Housewife - own home.(20) Number of children of this mother now living, including present birth Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at one P. M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) (Hollie Kennedy) was the midwife.(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Kingstree, S.C.

Given name added from a supplemental report

(26) Witness Amos Burger, Father.
(Signature of Witness necessary only when question 22 is signed by mark)(27) Signed June 7, 1906 J. G. McWhorter
Registrar Local Registrar

*When there was no attending physician or midwife, the father, householders, or friends should make this return, and a child breathes even once, it must not be reported as stillborn. No report is required for spontaneous abortions or stillborn pregnancies.

WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD. 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 1.

M. C. W. of Columbia