

## (1) PLACE OF BIRTH

County of

Township of

or

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

45864

1303

Registered No. 81

(For use of Local Registrar)

## (2) Full Name of Child

~~XXXXXXXXXXXX~~

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 22, 1904

## FATHER.

(8) FULL NAME

Stokes Woods

(9) PRESENT POSTOFFICE OF FATHER

Tuckerville S.C.

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

23

(12) BIRTHPLACE

Charleston S.C.

(13) OCCUPATION

Laborer.

(20) Number of children born to mother, including present birth

7

## MOTHER.

(14) NAME BEFORE MARRIAGE

Mrs. Ann. Plager

(15) PRESENT POSTOFFICE OF MOTHER

Tuckerville S.C.

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

23

(18) BIRTHPLACE

Charleston S.C.

(19) OCCUPATION

House Wife

(21) Number of children of this mother now living, including present birth

7

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was ~~born~~ at ~~place~~ on the date above stated.

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midway

Given name added from a supplemental report

(26) Witness

(Signature of Witness, necessary only when question 22 is signed by midwife)

(27) Filed

Jan 31, 1905

(Signature of Registrar)

\*When there was no attending physician or midwife, the father, grandfather, or other person, who was present at the birth, should sign this certificate, and a child register even when it must not be registered.

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD. N.B.—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.

State of Columbia.