

(1) PLACE OF BIRTH

County of Dorchester
 Township of Mallett
 or
 Inc. Town of
 or
 City of Atlanta Ga. (No. 1)
 (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
64369

Registration District No. 7012 Registered No. 549
 (For use of Local Registrar)
 St.; Ward

(2) Full Name of Child Mattie Roe Bertha Goodman If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? One (5) Number in order of birth 11 (6) Are Parents Married? Yes (7) DATE OF BIRTH 6 25 1916
 (To be answered only in case of Twins or Triplets) (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Goodman

(9) PRESENT POSTOFFICE OF FATHER Atlanta S.C.

(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 42 (Years)

(12) BIRTHPLACE Sumter Co

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 11

MOTHER.

(14) NAME BEFORE MARRIAGE Sarah Jane Nero

(15) PRESENT POSTOFFICE OF MOTHER Atlanta, S.C.

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 43 (Years)

(18) BIRTHPLACE Sumter Co

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Alice L. ...

(24) State whether Physician or Midwife (25) Address of Physician or Midwife
midwife Mark Matte Bridge S.C.

Given name added from a supplemental report

..... 191.....

..... Registrar

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

(27) Filed 7/3 1916 (28) A. Skelly
 Local 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 fifth month of pregnancy.

N. H.—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.
 McCaw, of Columbia.