

## (1) PLACE OF BIRTH

County of Orangeburg  
 Township of Daniel  
 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  
**36029**

Registration District No. 3.6.18. Registered No. 7.2.  
 (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 Alma Lee Gadsen (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 Oct. 16, 1912  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Lee Gadsen  
 (9) PRESENT POSTOFFICE OF FATHER Parler S C  
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 29 (Years)  
 (12) BIRTHPLACE S C  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 2

## MOTHER

(14) NAME BEFORE MARRIAGE Etter Gadsen  
 (15) PRESENT POSTOFFICE OF MOTHER Parler  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 26 (Years)  
 (18) BIRTHPLACE S C  
 (19) OCCUPATION House wife  
 (21) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11.9. A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sarah Williams  
 (24) State whether Physician or Midwife Mid Wife (25) Address of Physician or Midwife Daniel S C

Given name added from a supplemental report

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

(27) Filed Oct. 21, 1912 (28) W. A. Dantley 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.