

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 8.

(1) PLACE OF BIRTH *Edwardsburg*  
County of *Edwards*  
Township of *Penn*  
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.)  
Registration District No. *4308* Registered No. *5-8*  
(For use of Local Registrar)St.; Ward

**CERTIFICATE OF BIRTH**  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only  
**66632**

(2) Full Name of Child *Edmond White*  
If child is not yet named, make supplemental report as directed

(3) BOY or GIRL *Boy* (4) Twin or Triplet? *No* (5) Number in order of birth *3* (6) Are Parents Married? *Yes* (7) DATE OF BIRTH *June 28th 16*  
(Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <i>Alfred White</i>	(14) NAME BEFORE MARRIAGE <i>Stella Brown</i>	(16) PRESENT POSTOFFICE OF FATHER <i>Lawson NC</i>	(18) PRESENT POSTOFFICE OF MOTHER <i>Lawson NC</i>
(10) COLOR OR RACE <i>Negro</i>	(11) AGE AT LAST BIRTHDAY <i>26</i>	(13) COLOR OR RACE <i>Negro</i>	(17) AGE AT LAST BIRTHDAY <i>21</i>
(12) BIRTHPLACE <i>NC</i>	(15) BIRTHPLACE <i>NC</i>	(19) OCCUPATION <i>Domestic</i>	(21) Number of children of this mother now living, including present birth <i>3</i>
(13) OCCUPATION <i>Farmer</i>	(20) Number of children born to mother, including present birth <i>3</i>		

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was *Alfred White* at *Lawson* N.C., on the date above stated. (Born *Living* or stillborn) (Not a M. or P. M.)

(23) (Signature) *Mary White* (24) State whether Physician or Midwife *Midwife* (25) Address of Physician or Midwife *Lawson NC*

Given name added from a supplemental report

(26) Witness (Signature of witness necessary only when question 23 is signed by mark) *James X*

(27) Filed *June 28th 16* (28) *James X* 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.

*Albert N. Moseley, Local Registrar*