

## (1) PLACE OF BIRTH

## CERTIFICATE OF BIRTH

County of

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Township of

or  
Inc. Town of

Registration District No.

File No. For State Registrar Only  
55903

Registered No.

(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

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL

Girl

(4) Twin or Triplet?

No

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

April 22, 1906

(Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME

William Poston

(9) PRESENT POSTOFFICE OF FATHER

Kingsburg

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

23

(Years)

(12) BIRTHPLACE

Hannan

(13) OCCUPATION

Farming

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

1

## MOTHER

(15) NAME BEFORE MARRIAGE

Hond Gables

(16) PRESENT POSTOFFICE OF MOTHER

Kingsburg

(17) COLOR OR RACE

white

(18) AGE AT LAST BIRTHDAY

20

(Years)

(19) BIRTHPLACE

Kingsburg

(20) OCCUPATION

Nurse wife

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

1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature)

Anna M. Moore

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Hannan S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Signed

1906

(28)

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.

WRITING PLATE. WITH ENVELOPING 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.  
 McCaw, of Columbia.