

(1) PLACE OF BIRTH

County of *Lincoln*Township of *E*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

12180

Registration District No. *3406*Registered No. *4*

(For use of Local Registrar)

(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 *William Pauline*

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

(3) SEX OF
GIRL? *girl*(4) Twin
or triplet?(5) Number in
order of birth(6) Are
Parents
Married?(7) DATE OF
BIRTH *Jan 3 1912*
(Name of Month) (Day) (Year)

FATHER

(8) FULL
NAME *William Pauline*(9) PRESENT
POSTOFFICE
OF FATHER *Lincoln*(10) COLOR
OR RACE *white* (11) AGE AT LAST
BIRTHDAY *28* (Years)(12) BIRTHPLACE *Lincoln*(13) OCCUPATION *Farmer*(14) Number of children born to
mother, including present birth *3*

MOTHER

(14) NAME BEFORE
MARRIAGE *Martha Taylor*(15) PRESENT
POSTOFFICE
OF MOTHER *Lincoln*(16) COLOR
OR RACE *white* (17) AGE AT LAST
BIRTHDAY *23* (Years)(18) BIRTHPLACE *Lincoln*(19) OCCUPATION *Domestic*(20) Number of children of this mother
now living, including present birth *3*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was *alive* at *9* A.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) *Tanner* *B. Little*(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Lincoln *Lincoln Rt 4*Give name added from a supplement-
tal report

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Registrar

(26) Witness (Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed *May 10 1912* (28) *H. L. Bonebrake*
Local RegistrarWhen 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.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.