

MARGIN RESERVED FOR BINDING. 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. THIS OFFICE, No. 2, etc., in question 8. McCaw, of Columbia.

## (1) PLACE OF BIRTH

County of Williamsburg  
Township of Turkey

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.)

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

66650

Registration District No. 7311 Registered No. 48  
(For use of Local Registrar)

St. \_\_\_\_\_ Ward \_\_\_\_\_

## (2) Full Name of Child

Warren S. Bradley

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 June 1, 1906  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL  
NAME Wm. Bradley

(9) PRESENT  
POSTOFFICE  
OF FATHER Williamsburg

(10) COLOR  
OR  
RACE negro

(11) AGE AT LAST  
BIRTHDAY 22  
(Years)

(12) BIRTHPLACE Williamsburg Co.

(13) OCCUPATION farmer

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

## MOTHER.

(14) NAME BEFORE  
MARRIAGE Rosa S. Bradley

(15) PRESENT  
POSTOFFICE  
OF MOTHER Williamsburg

(16) COLOR  
OR  
RACE negro

(17) AGE AT LAST  
BIRTHDAY 24  
(Years)

(18) BIRTHPLACE Williamsburg Co.

(19) OCCUPATION Housewife

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

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11 M.  
(Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.

(23) (Signature) Correll H. Williamsburg

(24) State whether Physician or Midwife Physician

Given name added from a supplement-  
al report

191

Registrar

(26) Witness

(Signature of Witness necessary only  
when question 23 is signed by male)

(27) Filed immediately

(28) W. E. Davidson 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.