

Form No. 1.

(1) PLACE OF BIRTH

County of

Township of

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.)

(2) Full Name of Child. *Maude Atkins*

File No.—For State Registrar Only

4566

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. *23 00*

Registered No. *7*

(For use of Local Registrar)

(3) ~~Boy or~~
GIRL? *Girl*

(4) Twin
or Triplet? *No*

(5) Number in
order of birth

To be answered only in case of Twins or Triplets

(6) Are
Parents
Married? *Yes*

(7) DATE OF *Feb. 7*
BIRTH *1906*
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME

William Atkins

(9) PRESENT
POSTOFFICE
OF FATHER

*R. F. 10
Crawley S.C.*

(10) COLOR
OR
RACE

Black

(11) AGE AT LAST
BIRTHDAY

41

(Years)

(12) BIRTHPLACE

Abbeville Co. S.C.

(13) OCCUPATION

Farmer

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

12

MOTHER.

(14) NAME BEFORE
MARRIAGE

Marguerite Clites

(15) PRESENT
POSTOFFICE
OF MOTHER

*R. F. 10
Crawley S.C.*

(16) COLOR
OR
RACE

Black

(17) AGE AT LAST
BIRTHDAY

43

(Years)

(18) BIRTHPLACE

Abbeville Co. S.C.

(19) OCCUPATION

Farmer Wife

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

11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

Clara Frazier

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplement-
tal report

(26) Witness

William Atkins

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

(27) Filed

Mar 8 1906

(28)

W. D. Lovelace

Local Registrar

MARGIN RESERVED FOR BINDING.
WHEN PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
M. R.—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.
McClaw, of Columbia.

*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.