

(1) PLACE OF BIRTH

County of ColumbiaTownship of Shirleyor
Inc. Town of Cottagevilleor
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

48704

Registration District No. 1408 Registered No. 4
(For use of Local Registrar)(2) Full Name of Child Mamie Addison { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Girl (4) Twin or Triplet? One (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 23
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Clifton Addison(9) PRESENT POSTOFFICE OF FATHER Cottageville, S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28
(Years)(12) BIRTHPLACE Cottageville, S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Emma Eastling(15) PRESENT POSTOFFICE OF MOTHER Cottageville(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 26
(Years)(18) BIRTHPLACE Cottageville, S.C.(19) OCCUPATION Domestic(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 10 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) B. G. Hill, M.D. Cottageville, S.C.
(24) State whether Physician or Midwife (25) Address of Physician or MidwifeGiven name without letter at registration—
full report(26) Witness
(Signature of Witness necessary only when question 22 is signed by mark)(27) File Mar. 10, 1916 (28) B. G. Hill, M.D.
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.

MARGIN RESERVED FOR BINDING. WRITING 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 5. McCaw, of Columbia.