

(1) PLACE OF BIRTH

County of Pickens
Township of Liberty
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

16386

Registration District No. 9705

Registered No. 55

(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Dosha Mildred Patterson

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

(3) BOY OR GIRL?

girl

(4) Twin or Triplet?

To be answered only in case of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH

May 18 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Henry Thomas Patterson

(9) PRESENT POSTOFFICE OF FATHER

Liberty SC R 4

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

38
(Years)

(12) BIRTHPLACE

Gainesville Fla.

(13) OCCUPATION

Farming

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

7

MOTHER.

(14) NAME BEFORE MARRIAGE

Lizzie Howard

(15) PRESENT POSTOFFICE OF MOTHER

Liberty S C R 4

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

29
(Years)

(18) BIRTHPLACE

Oconee Co., S.C.

(19) OCCUPATION

Domestic

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

5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 4:49 P. M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. A. Sheldon M. A.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Liberty S C

Given name added from a supplemental report

(26) Witness

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

(27) Filed

19

(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.

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