

Form No. 1

(1) PLACE OF BIRTH

County of Charleston
 Township of Charleston
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

No. 10.—For State Registrar Only

561

Registration District No. 901Registered No. 12
(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 Harry Edward Jackson If child is not yet named, make supplemental report as directed

(3) SEX OR GENDER Boy (4) Sex or Gender Male (5) Number of children born to mother 7 (6) DATE OF BIRTH Jan 15 1925
 (7) (Day of Month) (Year)

FATHER: (8) FULL NAME Walter LeRoy Jackson (9) PRESENT POSTOFFICE OF FATHER Mt Pleasant (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (12) BIRTHPLACE S.C. (13) OCCUPATION Merchant
 MOTHER: (14) NAME BEFORE MARRIAGE Ada Williams (15) PRESENT POSTOFFICE OF MOTHER Mt Pleasant (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20 (18) BIRTHPLACE S.C. (19) OCCUPATION House wife
 (20) Number of children born to mother, including present birth 7 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Bess Richardson (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Mt Pleasant S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Jan 24 1925 (28) Isaac Child
Registrar

When there was no attending physician or midwife, then the father, householder, etc., should sign. If a child breathes even once, it must not be reported as stillborn. No report is needed before the fifth month of pregnancy.

WRITE PLAINLY. WITH SPACING. USE CAPITALS. USE A PERMANENT INK. IN CASE OF TWIN OR TRIPLETS, USE A SEPARATE BLANK FOR EACH CHILD. AND MARK THE FIRST-BORN. No. 1. THIS OTHER, No. 2, etc., in question 1.