

(1) PLACE OF BIRTH

County of FlamenceTownship of Lakeor
Inc. Town of

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

2009

Registration District No. 2009Register No. 85

For use of Local Registrar

St.;

Ward)

(2) Full Name of Child Louise McGee

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

(3) SEX
MALE(4) Twin
or Triplet?(5) Number in
order of birth(6) Are
Parents
Married?(7) DATE OF
BIRTHJuly 2128

(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAMEJames W. McGee(9) PRESENT
POSTOFFICE
OF FATHERLake R.(10) COLOR
OR
RACENegro(11) AGE AT LAST
BIRTHDAY26

(Years)

(12) BIRTHPLACE

SC

(13) OCCUPATION

Farm(14) Number of children born to
mother, including present birth3

MOTHER.

(14) NAME BEFORE
MARRIAGEFannie Brown(15) PRESENT
POSTOFFICE
OF MOTHERLake R.(16) COLOR
OR
RACENegro(17) AGE AT LAST
BIRTHDAY28

(Years)

(18) BIRTHPLACE

SC

(19) OCCUPATION

Wife(20) Number of children of this mother
now living, including present birth3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 6 a M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Louise McGee

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

MidwifeHurricaneGiven name added from a supplement-
tal report

(26) Witness

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

(27) Filed

7/28/28

(28)

R. L. Center

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.*When there was no attending physician or midwife, then the father, householder, etc., should make this return.
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