

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

or 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

18981

Registration District No. 3001

Registered No. 443

(For use of Local Registrar)

(2) Full Name of Child

Edmund Patterson

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet

No

(5) Number in order of birth

3

(6) Are Parents Married

Yes

(7) DATE OF BIRTH

June 10, 1923

(Day)

(Year)

FATHER.

(8) FULL NAME

Edmund Patterson

(9) PRESENT POSTOFFICE OF FATHER

Lexington S.C.

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

20

(12) BIRTHPLACE

Richland Co. S.C.

(13) OCCUPATION

Farming

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

3

MOTHER.

(14) NAME BEFORE MARRIAGE

Reed Jones

(15) PRESENT POSTOFFICE OF MOTHER

Lexington S.C.

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

28

(18) BIRTHPLACE

Richland Co. S.C.

(19) OCCUPATION

Farming

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

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

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

(23) (Signature)

*Dr. J. M. Linn*

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

*Lexington S.C.*

(Given name added from a supplemental report)

(26) Witness

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

(27) Filed *June 11, 1923*

(28) *A. B. Linn* 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.