

Form No. 1.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

BUREAU OF BUREAU OF RECORDS

Division of Vital Statistics

State Board of Health

File No. For State Registration

54169

County of YorkTownship of Catawba

or

Inc. Town of

or

City of Leslie

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

Registration District No. 44024Registered No. 24

(For use of Local Registrar)

(2) Full Name of Child Irene Brice

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

(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth 13

(6) Are Parents Married?

(7) DATE OF BIRTH Mar 4 1906

(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Lymna Brice(14) NAME BEFORE MARRIAGE Irene Christensen(9) PRESENT POSTOFFICE OF FATHER Leslie(15) PRESENT POSTOFFICE OF MOTHER Leslie(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 41 (Years)(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 37 (Years)(12) BIRTHPLACE Parfield Co(18) BIRTHPLACE Chester Co(13) OCCUPATION Farmers(19) OCCUPATION Housewife(20) Number of children born to mother, including present birth 13(21) Number of children of this mother now living, including present birth 11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive (Born alive or stillborn) (Mark A, M, or B, M)

on the date above stated.

(23) (Signature) Nancy Dixon

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

MidwifeM. A. Patton

Direct name of doctor or midwife

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

(27) Date 4/9/06 (28) J. H. Mub(29) 4/9/06 (30) J. H. Mub(31) 4/9/06 (32) J. H. Mub(33) 4/9/06 (34) J. H. Mub(35) 4/9/06 (36) J. H. Mub(37) 4/9/06 (38) J. H. Mub(39) 4/9/06 (40) J. H. Mub(41) 4/9/06 (42) J. H. Mub(43) 4/9/06 (44) J. H. Mub

THIS IS A PERMANENT RECORD. 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.

City of Columbia

When filed with the attending physician or midwife, this the father, householder, etc., should certify the return of the child to the state of health. It must not be reported as stillborn. No report is required of stillborn babies the result of pregnancy.