

## (1) PLACE OF BIRTH

County of WillsonTownship of Manning

Inc. Town of .....

City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

3651

Registration District No. 1605Registered No. .... 11 .....

(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 John Graham McRee

(1) SEX OF CHILD <u>Boy</u>	(4) Type of Trunk <u>To be entered only in case of Twin or Triple</u>	(3) Number in order of birth <u>1</u>	(5) Are Parents Married <u>Yes</u>	(7) DATE OF BIRTH <u>Jan 14 1923</u> (Day of Month) (Day) (Year)
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(8) FATHER'S NAME <u>Graham M. McRee</u>	(10) MARRIAGE BEFORE MARRIAGE <u>Never</u>
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(9) PRESENT RESIDENCE OF FATHER <u>Floydale Sh</u>	(11) PRESENT RESIDENCE OF MOTHER <u>Floydale Sh</u>
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(12) COLOR OR RACE <u>Colored</u>	(13) AGE AT LAST BIRTHDAY <u>37</u> (Year)	(14) COLOR OR RACE <u>Colored</u>	(15) AGE AT LAST BIRTHDAY <u>37</u> (Year)
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(16) BIRTHPLACE <u>Willson, S.C.</u>	(18) BIRTHPLACE <u>Marion, S.C.</u>
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(17) OCCUPATION <u>Farmer</u>	(19) OCCUPATION <u>House work</u>
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(20) Number of children born to mother, including present birth <u>8</u>	(21) Number of children of this mother now living, including present birth <u>6</u>
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## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11 P.M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) L. B. McRee(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife For 14, 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 Feb. 24 1923 (28) B. J. McRee

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