

Form No. 1

(1) PLACE OF BIRTH

County of Colleton  
 Township of St. Andrews  
 or  
 Inc. Town of .....  
 or  
 City of .....

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

No. for State Registrar  
**795**

Registration District No. 1409 Registered No. 2  
 (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 Laveria Ackerman If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD Girl (4) Twin or Triplet ..... (5) Number in order of birth ..... (6) Age of Child at Birth 30 (7) DATE OF BIRTH Jan 5 1933  
 To be answered only in case of Twin or Triplet (Month) (Day) (Year)

**FATHER.**  
 (8) RACE English Ackerman  
 (9) PRESENT RESIDENCE OF FATHER Collaquick SC  
 (10) COLOR Colored (11) AGE AT LAST BIRTHDAY 23 (Year)  
 (12) BIRTHPLACE SC  
 (13) OCCUPATION Farmer  
 (14) Number of children born to mother, including present birth

**MOTHER.**  
 (15) NAME BEFORE MARRIAGE Esther Davidson  
 (16) PRESENT RESIDENCE OF MOTHER Collaquick SC  
 (17) COLOR Colored (18) AGE AT LAST BIRTHDAY 21 (Year)  
 (19) BIRTHPLACE SC  
 (20) OCCUPATION Domestic  
 (21) Number of children of this mother now living, including present birth

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was Alive at 1 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Elisa Ackerman  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Collaquick

Given names added from a supplemental report

.....  
 .....  
 Registrar

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

(27) Filed Jan 8 1933 (28) Elisa Ackerman

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 required before the fifth month of pregnancy.