

County of San Diego  
Township of Cond. Creek

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

Inc. of Town of .....

Registration District No. 28

## UP BIRTH

### Plan No.—For State Inspector Only

10984

Only if birth occurs in a hospital or

(No. .... other institution, give name of)

**28.9.1**

Registered No. 9  
(For use of Local Registrar)

(2) Full Name of Child... Will... Patterson

(1) BOY OR GIRL? <i>B</i>	(4) Twin or Triplet?	(5) Number in order of birth
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	(6) Are Parents Married
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(7) If child is not yet named, make supplemental report as directed.

FATHER.  
FULL NAME *Will Patterson*

(14) NAME BEFORE MARRIAGE Lila DATE OF BIRTH April 7, 1923  
(Month) (Day) (Year)

(1) PRESENT PO: OFFICE OF: *Lancaster Co*

(15) PRESENT POSTOFFICE OF MOTHER Rose Bell Wells

(iv) COLOR OR RACE Black (ii) AGE AT LAST BIRTHDAY 24 (Years)

(16) COLOR OR RACE *Colored* (17) AGE *5.0*  
BIRTHPLACE *Ind.*

(12) BIRTHPLACE  
Lancaster Co

(18) NAME OF PERSON Laucaster DATE AT LAST 1/8  
INTERVIEW 1/8

(13) OCCUPATION  
Laborer

(ii) Occupation Housewife : C.

(20) Number of children born to mother, including present birth 13

(21) Number of children of this mother  
now living, including present birth 5

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.**

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

(33) (Signature) [Signature] (35) Address of Physician or Midwife 1000 1st St. N. W.

(Given name added from a supplemental report)

(26) Witness ..... (Signature of Witness necessary only when question 25 is signed by him) *[Signature]*

(27) Filed 5-1-1963 Local Registrar

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.

As a woman without work, she cannot pay her hospital bill. Her report is given to the physician before the fifth month of pregnancy.