

## (1) PLACE OF BIRTH

County of Green HillsTownship of Whick Springor  
Inc. Town ofor  
City of

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

4246

Registration District No. 2204Registered No. 16

(For use of Local Registrar)

St.; ..... Ward)

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

(2) Full Name of Child Julia Katarina Alexander(3) BOY OR GIRL? girl(4) Twin or Triplet? 2(5) Number in order of birth 1

To be answered only in case of Twins or Triplets

(6) Are Parents Married? yes(7) DATE OF BIRTH Feb. 16, 1914

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME W. E. Alexander(9) PRESENT POSTOFFICE OF FATHER Greer S.C.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 37

(Years)

(12) BIRTHPLACE Pickens Co.(13) OCCUPATION Designer(20) Number of children born to mother, including present birth Ten

## MOTHER.

(14) NAME BEFORE MARRIAGE Mertie Wilson(15) PRESENT POSTOFFICE OF MOTHER Greer S.C.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 33

(Years)

(18) BIRTHPLACE Greer Co.(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth Eight

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 11:30 P.M., on the date above stated.(23) (Signature) D. E. Hagdon

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Greer S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed 3-14-14(28) F. G. James

Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this report as stillborn. No report is desired of stillbirths before fifth month of pregnancy.

a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

FORM NO. 1  
WHICH PLAINLY, WHEN FILLING IN, THIS IS A PERMANENT RECORD.  
N.B.—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.