

(1) PLACE OF BIRTH

County of Greenville **CERTIFICATE OF BIRTH**
STATE OF SOUTH CAROLINA.
Township of Pickens Spring Bureau of Vital Statistics
Inc. Town of State Board of Health
City of Registration District No. 2204

File No. — For State Registrar Only

12246

Registered No. 152
(For use of Local Registrar)

(2) Full Name of Child Julia Katarina Alexander
If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? 2 (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Feb. 18, 1916
To be answered only in case of Twins or Triplets

FATHER
(8) FULL NAME W. G. 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 Seven

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 Homemaker

(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 10:30 P.M., on the date above stated.
(born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) D. E. Heston

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

Given name added from a supplemental report
..... 191.....
Registrar

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

(27) Filed 3-14-1916 (28) F. G. James
Local Registrar

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

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FORM NO. 8
WHEN RECEIVED FOR BINDING
WHEN PLAIN. WHEN USING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the
MAGAZINE OF COLUMBIA FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.