

(1) PLACE OF BIRTH

County of ChristchurchTownship of CH.

or

Inc. Town of

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

23950

Registration District No. 1203 Registered No. 106

(For use of Local Registrar)

(No. St.) (Word)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mary Jefferson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Sub</u>	(4) Twin or Triplet To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Age Present Married <u>yes</u>	(7) DATE OF BIRTH <u>Aug 31 1923</u> (Name of Month) (Day) (Year)
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FATHER.		MOTHER.	
(8) FULL NAME <u>Thom Jefferson</u>	(14) NAME BEFORE MARRIAGE <u>Mary H. Shator</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Christchurch SC</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Christchurch SC</u>
(10) COLOR OR RACE <u>negro</u>	(11) AGE AT LAST BIRTHDAY <u>21</u> (Year)	(16) COLOR OR RACE <u>negro</u>	(17) AGE AT LAST BIRTHDAY <u>28</u> (Year)
(12) OCCUPATION <u>Farming</u>	(18) BIRTHPLACE <u>SC</u>	(19) OCCUPATION <u>Housewife</u>	(21) Number of children of this mother now living, including present birth <u>1</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 5:9 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) S. L. McEachern(24) State whether Physician or Midwife midwife(25) Address of Physician or Midwife McEachern

Given name added from a supplemental report

(26) Witness

Signature of Witness necessary only when question 23 is signed by mark

(27) Filed

Ex 1 23 (28) M. S. Wake Local 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.