

(1) PLACE OF BIRTH

County of

Township of

or Inc. Town of

or City of Spitby

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

16655

Registration District No. 40-a Registered No. 349
(For use of Local Registrar)

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

(3) BOY OR GIRL (4) Twin or Triplet? (5) Number in order of birth: 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH: 5 15, 1922
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Alden H M Coakley

(9) PRESENT POSTOFFICE OF FATHER City

(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY: 48 (Years)

(12) BIRTHPLACE N.C.

(13) OCCUPATION Book Keeper

(14) Number of children born to mother, including present birth: 11

MOTHER

(14) NAME BEFORE MARRIAGE Marcos McCarver

(15) PRESENT POSTOFFICE OF MOTHER: City

(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY: 42 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION: Housewife

(21) Number of children of this mother now living, including present birth: 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was 9 at 9 M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Joe W Allen (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report:

Isaac 1922 Registrar

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

(27) Filed 6-15 1922 (28) Joe Cohen (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.

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.

State of South Carolina,
County of Spartanburg.

Personally appeared before me Mrs. A. H. McCracken, who first being duly sworn says that she is the mother of Isaac McCracken, who was born in the City of Spartanburg S. C. on May 15, 1922, and that her name before marriage was Marion McCravey, and in as much as the name of her son does not appear in the record of his birth ask that the name of Isaac McCracken, be inserted therein.

Sworn to before me this
25th day of September 1940.

Walter B. Cullen
Notary Public for S. C.

Mrs A H McCracken