

Form No. 1

(1) PLACE OF BIRTH

County of ColumbiaTownship of North

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. - For State Registrar Only

12547

Registration District No. Registered No. 32

(For use of Local Registrar)

(No. St.; Ward)

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

(2) Full Name of Child Frederick H. McCain (If child is not yet named, make supplemental report as directed)(3) BOY OR GIRL Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF

BIRTH March 2 1923

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Frederick H. McCain(9) PRESENT POSTOFFICE OF FATHER Monrovia, N.C.(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 28

(Years)

(12) BIRTHPLACE Monrovia, N.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Anna McCain(15) PRESENT POSTOFFICE OF MOTHER Monrovia, N.C.(16) COLOR OR RACE Negro(17) AGE AT LAST BIRTHDAY 23

(Years)

(18) BIRTHPLACE Monrovia, N.C.(19) OCCUPATION Same as father(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Robert H. McCain

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

(Given name added from a supplemental report)

(26) Witness

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

(27) Filed March 12 1923

(28)

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.

MARGIN RESERVED FOR BINDING.

WHITE PLAINS, WITH UNFADING INK—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 3.

McGraw-Hill, Columbia, S. C.