

Form No. 1

## (1) PLACE OF BIRTH

County of CharlestonTownship of Christ Church

Inc. Town of .....

City of .....

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

Registration District No. 901Registered No. 22  
(For use of Local Registrar)(2) Full Name of Child Isaac Simmons

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

(3) SEX OF CHILD Boy(4) Twin one  
or Triplet  
To be answered only in case of Twin or Triplet(5) Number in  
order of birth(6) Are  
Parents  
Married Yes(7) DATE OF  
BIRTH Jan 15 1923  
(Month) (Day) (Year)

## FATHER

(8) FULL  
NAME Ben Simmons(9) PRESENT  
RESIDENCE  
OF FATHER 1112 Pleasant(10) COLOR  
OR  
RACE Neg. Ch(11) AGE AT LAST  
BIRTHDAY 20  
(Years)(12) BIRTHPLACE Charleston Co.(13) OCCUPATION laborer(14) Number of children born to  
mother, including present birth one

## MOTHER

(14) NAME BEFORE  
MARRIAGE Eliza Jones(15) PRESENT  
RESIDENCE  
OF MOTHER 1112 Pleasant(16) COLOR  
OR  
RACE Neg. Ch(17) AGE AT LAST  
BIRTHDAY 15  
(Years)(18) BIRTHPLACE Charleston Co.(19) OCCUPATION house work(20) Number of children of this mother  
now living, including present birth one

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born 5 A. M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) (Signature) Emma Jones(23) Since whether Physician or Midwife Midwife(24) (Signature of Physician or Midwife) W. H. PleasantGiven name added from a supplement-  
tal report

(25) Witness

(Signature of Witness necessary only  
when question 23 is signed by mark)(26) Filed Jan 24 1923(27) (Signature) L. D. Jones

Registrar

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

N. B.—In case of twins or triplets use a separate card for each child. See question 1.

Revised by Columbia, Columbia, S. C.