

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town of
or
City of

(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

48889

Registration District No. 1803

Registered No. 111

(For use of Local Registrar)

(2) Full Name of Child. Fleming Blocker

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

Jan 8 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Tom Blocker

(9) PRESENT POSTOFFICE OF FATHER

Edgewood

(10) COLOR OR RACE

W.

(11) AGE AT LAST BIRTHDAY

41
(Years)

(12) BIRTHPLACE

S. C.

(13) OCCUPATION

Farmer

(20) Number of children born to mother, including present birth

Three

MOTHER.

(14) NAME BEFORE MARRIAGE

Richardson

(15) PRESENT POSTOFFICE OF MOTHER

Edgewood

(16) COLOR OR RACE

negro

(17) AGE AT LAST BIRTHDAY

37
(Years)

(18) BIRTHPLACE

S. C.

(19) OCCUPATION

Housewife

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

Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 7 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary J. Blocker

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

191

Registrar

(26) Witness

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

(27) Filed Jan 17 1916 (28) T. E. Miller

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.

MASSIVE RESERVED FOR BINDING.

WRITE PLAINLY, 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 5.

McCaw, of Columbia