

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No. — For State Registrar Only
49633

County of Lauderdale

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Township of Indian Land

or Inc. Town of Registration District No. 2803 Registered No. 29

City of R.F.D. #3 Fort Mill S.C. (For use of Local Registrar)

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

(2) Full Name of Child Theresa Mae Alexander } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? — (5) Number in order of birth 30 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 31 1916
to be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Benjamin James Alford

(14) NAME BEFORE MARRIAGE Wesley Alford Collins

(9) PRESENT POSTOFFICE OF FATHER R.F.D. #3 Fort Mill S.C.

(15) PRESENT POSTOFFICE OF MOTHER R.F.D. #3 Fort Mill S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 30 (Years)

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 22 (Years)

(12) BIRTHPLACE Near Ft. Mill, York Co. S.C.

(18) BIRTHPLACE Belair, S.C.

(13) OCCUPATION Farmer

(19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 3

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 2 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R.M. Potts

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

Given name added from a supplemental report

June 29 1916
Wm. Miller
State Registrar

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

(27) Filed Jan 6 1916 (28) J.S. Hubert 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 PRINTING. WRITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD. M. R.—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.