

MARGIN 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.

Form No. 1

(1) PLACE OF BIRTH

County of Abbeville
Township of Donalds
OR
Inc. Town of.....
OR
City of Donalds
(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

40528

Registration District No. 105 Registered No. 65
(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? 4 (5) Number in order of birth 4 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 19 1923
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Henry Patton
(9) PRESENT POSTOFFICE OF FATHER Donalds
(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 36
(Years)
(12) BIRTHPLACE Donalds
(13) OCCUPATION Railroad man
(20) Number of children born to mother, including present birth 4

MOTHER.
(14) NAME BEFORE MARRIAGE Louise Jones
(15) PRESENT POSTOFFICE OF MOTHER Donalds
(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 25
(Years)
(18) BIRTHPLACE Donalds
(19) OCCUPATION Farming
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Cornelia Sanders
(24) State whether Physician or Midwife X (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Jan 10 1924 (28) Lucile Humphreys
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.

McCAW OF COLUMBIA, COLUMBIA, S. C.