

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No.

File No. - For State Registrar Only

1615

Registered No. 33
(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

Alexander Patterson

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

3. BOY OR GIRL

Boy

4. Twin or Triplet

To be answered only in event of Twin or Triplet

5. Number in order of birth

6. Are Parents Married

7. DATE OF BIRTH

Feb 16, 1923
(Name of Month) (Day) (Year)

FATHER

8. FULL NAME

Buddie McRae

9. PRESENT POSTOFFICE OF FATHER

Burrellville, S.C.

10. COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

31
(Year)

12. BIRTHPLACE

Marlboro Co. S.C.

13. OCCUPATION

Farmer

20. Number of children born to mother, including present birth

1

14. NAME BEFORE MARRIAGE

Bess Patterson

15. PRESENT POSTOFFICE OF MOTHER

McRae, S.C.

16. COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

16
(Year)

18. BIRTHPLACE

Marlboro Co. S.C.

19. OCCUPATION

Farm Hand

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born on the date above stated.

Born at 10 A.M. at 10 A.M. or P.M.
Born alive or stillborn

(23) (Signature)

(24) State whether Physician or Midwife

(25) State whether Physician or Midwife

(26) Given name added from a supplementary report

(27) Witness

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

(28) Date Feb 16, 1923

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.