

Form No. 1.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

48525

County of CharlestonTownship of Blackstockor
Inc. Town ofor
City ofRegistration District No. 1101Registered No. 13

(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 Sarah Young { If child is not yet named, make supplemental report as directed(3) SEX OR
Girl(4) Twin
or Triplet?(5) Number in
order of birth

To be answered only in case of Twins or Triplets

(6) Age
15
Months?

(7) DATE OF

BIRTH Feb. 15

(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME Jack Young(9) PRESENT
POSTOFFICE
OF FATHER Blackstock S.C.(10) COLOR
OR
RACE Negro(11) AGE AT LAST
BIRTHDAY 32

(Years)

(12) BIRTHPLACE S.C.(13) OCCUPATION Farmer(20) Number of children born to
mother, including present birth { 6

MOTHER.

(14) NAME BEFORE
MARRIAGE Sarah Williams(15) PRESENT
POSTOFFICE
OF MOTHER Blackstock S.C.(16) COLOR
OR
RACE Negro(17) AGE AT LAST
BIRTHDAY 36

(Years)

(18) BIRTHPLACE S.C.(19) OCCUPATION Farmer(21) Number of children of this mother
now living, including present birth { 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 10 A.M. (Born alive or stillborn) (Hour A.M. or P.M.)
on the date above stated.(23) (Signature) Matthe Young

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

MidwifeShelton, S.C.Given name added from a supplement-
tal report

(26) Witness

(Signature of Witness necessary only
when question 22 is signed by mark)(27) Filed Feb. 19 1916(28) W. A. Blaine(29) 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.

MAKING HIMSELF NOT MARRIED.

WHEN MAILED, WITH CERTAINING INFO—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 2.

McDaw, of Columbia