

Form No. 1.

(1) PLACE OF BIRTH

County of Fairfield

Township of 1st

or
Inc. Town of 1st

City of 1st

(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

48981

Registration District No. 1912 Registered No. 5

(For use of Local Registrar)

(2) Full Name of Child. John K. Young If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Feb. 25 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John K. Young

(9) PRESENT POSTOFFICE OF FATHER Stratthurs

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 34 (Years)

(12) BIRTHPLACE Fairfield

(13) OCCUPATION Harmer

(20) Number of children born to mother, including present birth 13

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Smith

(15) PRESENT POSTOFFICE OF MOTHER Stratthurs

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 46 (Years)

(18) BIRTHPLACE Fairfield

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Haney S. Williams

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

midwife Blair St

Given name added from a supplemental report

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

(27) Filed Mar 1 1915 (28) St E D. Williams 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.

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.