

Form No. 1.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

54174

(1) PLACE OF BIRTH

County of YorkTownship of Catawba

or

Inc. Town of

or

City of

Registration District No. 4404Registered No. 22

(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 Mrs. Patton

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

(8) FULL NAME

FATHER.

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 20

(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Farm Laborer

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

1

(15) NAME BEFORE MARRIAGE

MOTHER.

(16) PRESENT POSTOFFICE OF MOTHER

(17) COLOR OR RACE Negro(18) AGE AT LAST BIRTHDAY 18

(Years)

(19) BIRTHPLACE

S.C.

(20) OCCUPATION

Farm Laborer

(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 89 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. R. Smith

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

Midwife

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed

1914

(28)

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.

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.
McGraw, of Columbia.