

(1) PLACE OF BIRTH

County of Summerville

Township of

or
Inc. Town ofor
City of

(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

17752

Registration District No. 22A Registered No. 376

(For use of Local Registrar)

(No. Northampton St. 1 Ward)(2) Full Name of Child Rachel Louise MacRae

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

(1) BOY OR GIRL? Girl

(4) Twin or triplet?

(5) Number in order of birth
to be answered only in event of twins or triplets(6) Are Parents Married? Yes(7) DATE OF BIRTH June 9 23
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Mr. E. F. MacRae(9) PRESENT POSTOFFICE OF FATHER Summerville(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 37
(Years)(12) BIRTHPLACE Virginia(13) OCCUPATION Teacher(14) Number of children born to mother, including present birth 2

MOTHER.

(15) NAME BEFORE MARRIAGE Archie Lodge(16) PRESENT POSTOFFICE OF MOTHER Summerville(17) COLOR OR RACE W (18) AGE AT LAST BIRTHDAY 33
(Years)(19) BIRTHPLACE Maryland(20) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born 5:00 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) [Signature](24) State whether Physician or Midwife (25) Address of Physician or Midwife Summerville

Given name added from a supplemental report

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

(27) File July 7 1923 (28) E. Smith 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.

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