

MARGIN RESERVED FOR BINDING.

WHITE 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

BUREAU OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH  
 County of Horry  
 Township of Beaufort  
 or  
 Inc. Town of .....  
 or  
 City of .....

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only

22535

Registration District No. .... Registered No. ....  
 (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 Mary Grace Hughes If child is not yet named, make supplemental report as directed

3) BOY OR GIRL girl 4) Twin or Triplet? To be answered only in case of Twins or Triplets 5) Number in order of birth ..... 6) Are Parents Married? yes 7) DATE OF BIRTH June 19, 1924  
 (Month) (Day) (Year)

FATHER.  
 8) FULL NAME Walker Hughes  
 9) PRESENT POSTOFFICE OF FATHER Corry Co. #2  
 10) COLOR OR RACE white 11) AGE AT LAST BIRTHDAY 47  
 (Years) 12) BIRTHPLACE Horry Co  
 13) OCCUPATION farmer  
 20) Number of children born to mother, including present birth 11

MOTHER.  
 14) NAME BEFORE MARRIAGE Hosie Hughes  
 15) PRESENT POSTOFFICE OF MOTHER Corry Co. #2  
 16) COLOR OR RACE white 17) AGE AT LAST BIRTHDAY 38  
 (Years) 18) BIRTHPLACE Horry Co  
 19) OCCUPATION housewife  
 21) Number of children of this mother now living, including present birth 10

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:10 a  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. Sanborn, M.D. (24) State whether Physician or Midwife (25) Address of Physician or Midwife Corry Co. S. C.

Given name added from a supplemental report

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

(27) Filed ..... (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.

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