

(1) PLACE OF BIRTH

County of *W. Burg*Township of *Johnston*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

70791

Registration District No. *H. 304* Registered No. *63*

(For use of Local Registrar)

St.; Ward

(2) Full Name of Child *Jim Haselberg*

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? *No* (7) DATE OF BIRTH *June 17 1916*
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME *Unknown*(9) PRESENT POSTOFFICE OF FATHER *" "*(10) COLOR OR RACE *White* (11) AGE AT LAST BIRTHDAY *19* (Years)(12) BIRTHPLACE *Unknown*(13) OCCUPATION *Unknown*(20) Number of children born to mother, including present birth *One*

MOTHER.

(14) NAME BEFORE MARRIAGE *Myrtle Gaster*(15) PRESENT POSTOFFICE OF MOTHER *Johnston*(16) COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *19* (Years)(18) BIRTHPLACE *Johnston*(19) OCCUPATION *House work &c.*(21) Number of children of this mother now living, including present birth *One*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *alive* at *4* *9* *A.M.* on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) *R. C. Smith*(24) State whether Physician or Midwife (25) Address of Physician or Midwife *Johnston &c*

Given name added from a supplemental report

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

(27) Filed *July 10 1916* (28) *R. C. 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.

FIFTH MONTH OF PREGNANCY.

McCauley of Columbia