

(1) PLACE OF BIRTH

County SauwaseTownship of Hunter

or

Inc. Town of

or

City of Clinton

(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 Registration

56504

(2) Full Name of Child Louise Grant

If child is not yet named, under supplemental report or direct

(3) BOY OR GIRL? girl(4) Twin or Triplet? Is answered only in case of twins or triplets

(5) Number in order of birth

(6) Are Parents Married? Yes(7) DATE OF BIRTH Apr. 27, 1906

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Benj. Franklin Grant(9) PRESENT POSTOFFICE OF FATHER Clinton S.C.(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 36 (Years)(12) BIRTHPLACE S.C.(13) OCCUPATION 2^d Hand in Cotton Mill(20) Number of children born to mother, including present birth { 3 }

MOTHER.

(14) NAME BEFORE MARRIAGE Effie Page(15) PRESENT POSTOFFICE OF MOTHER Clinton S.C.(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 33 (Years)(18) BIRTHPLACE S.C.(19) OCCUPATION Household(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 alive at Clinton S.C. on the date above stated. (Born alive or stillborn) (Show A. M. or P. M.)(23) (Signature) J. W. Bailey(24) State whether Physician or Midwife (25) Address of Physician or Midwife Clinton S.C.

Given name added from a supplemental report

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

(27) Filed Apr 27, 1906 (28) J. W. Bailey Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. No report is desired or stillbirth before the fifth month of pregnancy.

MARGIN RESERVED FOR BINDING.

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 3.

Gov. of Columbia