

(1) PLACE OF BIRTH

County of Charleston
 Township of Harrison
 or
 Inc. Town of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No. — For State Registrar Only

41775

Registration District No. 1306 Registered No. 21
 (For use of Local Registrar)

City of (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Margaret Halliday (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 22 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wm Halliday

(9) PRESENT POSTOFFICE OF FATHER Alcola S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34
 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Lda Isabelle Huggins

(15) PRESENT POSTOFFICE OF MOTHER Alcola S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24
 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) William Halliday
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Dec 22 1922 (28) R. E. Thompson
 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 be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.