

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
Cau. of Columbia FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Greenwill

Township of Clay

Inc. Town of

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

64542

Registration District No. 2-208 Registered No. 18

(For use of Local Registrar)

(2) Full Name of Child John Henry Carson { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 20, 1914
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Paul Carson

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

(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 46 (Years)

(12) BIRTHPLACE Hartsumburg Co. S.C.

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 1-12

MOTHER.

(14) NAME BEFORE MARRIAGE Alice Williams

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

(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 43 (Years)

(18) BIRTHPLACE Henderson Co. N.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive at 4 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. A. Lindsey M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Tigerville S.C.

Given name added from a supplemental report

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Registrar

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

(27) Filed June 23, 1914 (28) G. V. Phillips 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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