

Form No. 3

(1) PLACE OF BIRTH

County of MarionTownship of Reaves

or

Inc. Town of

or

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

7823

Registration District No. 3/65

Registered No.

(For use of Local Registrar)

(2) Full Name of Child J. M. J. Harrison

(If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy(4) Twin or Triplet? No

To be answered only in event of Twin or Triplet

(5) Number in order of birth 1(6) Are Parents Married? Yes

(7) DATE OF BIRTH

Sept 12, 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Mr. J. Frank Harrison(9) PRESENT POSTOFFICE OF FATHER Marion, S.C.(10) COLOR OR RACE N(11) AGE AT LAST BIRTHDAY 38
(Year)(12) BIRTHPLACE Marion County, S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Myrtle Salmons(15) PRESENT POSTOFFICE OF MOTHER Marion, S.C.(16) COLOR OR RACE N(17) AGE AT LAST BIRTHDAY 28
(Year)(18) BIRTHPLACE Marion County, S.C.(19) OCCUPATION House work(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 1:45 P.M. on the date above stated.
(Born alive or stillborn) (Hour and P. M.)(23) (Signature) J. H. Smith(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Marion, 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 Apr 2, 1923(28) J. M. Schaffer

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.