

(1) PLACE OF BIRTH

County of

Township of

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

19003

Registration District No. 20.1

Registered No. 35

For use of Local Registrar

(2) Full Name of Child Catharine Hutchinson

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

(3) BOY OR GIRL? girl(4) Twin or Triplet? /(5) Number in order of birth /(6) Are Parents Married? yes(7) DATE OF BIRTH July 19

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Marvin Dudley Hutchinson(9) PRESENT POSTOFFICE OF FATHER Florence S.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 25 (Years)(12) BIRTHPLACE Florence S.(13) OCCUPATION Car Repairer and R.R.C.(20) Number of children born to mother, including present birth one

MOTHER.

(14) NAME BEFORE MARRIAGE Mrs. Daisy Turner Hutchinson(15) PRESENT POSTOFFICE OF MOTHER Florence S.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Years)(18) BIRTHPLACE Florence S.(19) OCCUPATION House-Wife(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 7:20 a. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. H. H. H. H.(24) State whether Physician or Midwife (25) Address of Physician or Midwife Hanna, S.C.

Given name added from a supplemental report

....., 191.....

Registrar

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

(27) Filed March 1916 (28) C. C. Galt M.D. 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.

Registrar

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