

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH.

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

File No.—For State Registrar Only

44770

County of Alameda

Township of Windsor...

Inc. **or** Town of.....

City of

Registration District No. 42572. Registered No. 114.....
(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
..... If child is not yet named, make

(2) Full Name of Child Robert Ernest Hansen If child is not yet named, submit supplemental report as directed

(3) BOY OR GIRL?

(4) Twin or Triplet?

(5) Number in order of birth

(6) **Are
Parents
Married?**

1(7) DATE OF

BIRTH.....Dec 29, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Justin B. ...

(9) PRESENT POSTOFFICE OF FATHER Cherry Hill 7C

(10) COLOR OR RACE *colored* (11) AGE AT LAST BIRTHDAY *25* (Years)

(12) BIRTHPLACE

(13) OCCUPATION

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

MOTHER.

(14) NAME BEFORE MARRIAGE Elizabeth Mills

(15) PRESENT POSTOFFICE OF MOTHER Cherokee SC

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 22 (Years)

(18) BIRTHPLACE

(19) OCCUPATION

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was... John A. Blair ...at 7.2 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23). (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Dec 31 1922. (28) W. W. Pascher 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.

MARGIN RESERVED FOR BINDING.

MARGIN RESERVE AND FUND DEPLETION.
—THEY ARE NOT THE SAME—THIS IS A PERMANENT RECORD.

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

TWIN OR BORN No. 1. THE OTHER, No. 2, etc., in question 5.

— COLUMBIA S. C. —