

County of Hampton
Township of Hall

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

40875

Registration District No. 2400 Registered No. 131
(For use of Local Registrar)
City of Hampton (No. 131 Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

2 Full Name of Child Amos Harris { If child is not yet named, make supplemental report as directed

(1) SEX OF CHILD Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE Feb 4 1914
BIRTH (Name of Month) (Day) (Year)

FATHER

MOTHER

8 FULL NAME Henry Harris

(14) NAME BEFORE MARRIAGE Mary Perry

(9) PRESENT POSTOFFICE OF FATHER Edisto Is

(15) PRESENT POSTOFFICE OF MOTHER Edisto Is

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

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

(12) BIRTHPLACE Hampton Co

(18) BIRTHPLACE Hampton Co

(13) OCCUPATION Public work

(19) OCCUPATION Public work

21 Number of children born to mother, including present birth 3

(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 Hampton on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) Mary Perry

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

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Jan 8 1914 (28) H. C. Dickinson 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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