

(1) PLACE OF BIRTH

County of CharlestonTownship of Charleston

or

Inc. Town of Jay's Mills

or

City of Lowm 22

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Martha Washington Holt

File No. — For State Registrar Only

48529

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 1103Registered No. 19

(For use of Local Registrar)

(3) BOY OR GIRL? yes(4) Twin or Triplet? no(5) Number in order of birth 9(6) Are Parents Married? yes(7) DATE OF BIRTH July, 22

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Erasmus Arthur Holt(9) PRESENT POSTOFFICE OF FATHER Charleston S.C. R-4203(10) COLOR white  
OR RACE Am(11) AGE AT LAST BIRTHDAY 45

(Years)

(12) BIRTHPLACE Roberson Co. N.C.(13) OCCUPATION Wrecker in Building(14) Number of children born to mother, including present birth 9

## MOTHER.

(14) NAME BEFORE MARRIAGE Ellen F. Homan Haley(15) PRESENT POSTOFFICE OF MOTHER Charleston S.C. R-4203(16) COLOR white  
OR RACE Am(17) AGE AT LAST BIRTHDAY 47

(Years)

(18) BIRTHPLACE Union Co. N.C.(19) OCCUPATION Wrecker + Housewife(20) Number of children of this mother now living, including present birth 8

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(21) I hereby certify that I attended the birth of this child, who was Alive at 6 50 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) (Signature) H. E. Homan

(24) State whether Physician or Midwife

(23) Address of Physician or Midwife Charleston 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 March 23

1916

(28)

John Homan

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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