

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 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McCaW, of Columbia.

(1) PLACE OF BIRTH

County of

Township of

Inc. Town of

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.—Hospital Registration
56454

Registration District No.

Registered No. 20
(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL?

Girl

(4) Sex—
or Taglets?(5) Number in
order of birth

3

(6) Are
Parents
Married?

Yes

(7) DATE OF
BIRTHApr. 10, 1926
(Name of Month, Day, Year)

FATHER.

(8) FULL
NAME

Robert Harris

(9) PRESENT
POSTOFFICE
OF FATHER

Lancaster S.C.

(10) COLOR
OR
RACE

Black

(11) AGE AT LAST
BIRTHDAY26
(Years)

(12) BIRTHPLACE

Lancaster S.C.

(13) OCCUPATION

Farmer

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

4

(14) NAME BEFORE
MARRIAGE

Luba Arthur

(15) PRESENT
POSTOFFICE
OF MOTHER

Lancaster S.C.

(16) COLOR
OR
RACE

Black

(17) AGE AT LAST
BIRTHDAY22
(Years)

(18) BIRTHPLACE

Lancaster S.C.

(19) OCCUPATION

House Wife

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

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn on the date above stated.

(23) (Signature)

M. L. Harris

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

mid wife

Given name added from a supplement-
tal report

181

Registrar

(26) Witness

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

(27) Filed

181

(28)

Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report as soon as a child breathes even once, it must not be reported as stillborn. No report is desired at stillbirths before the fifth month of pregnancy.

a child breathes even once, it must not be reported as stillborn. No report is desired at stillbirths before the fifth month of pregnancy.