

(1) PLACE OF BIRTH
 County of Hampson
 Township of St. Albans
 or
 Inc. Town of Englewood
 or
 City of (No.)
 (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

52573

Registration District No. 2403 Registered No. 14
 (For use of Local Registrar)

(2) Full Name of Child Earlyn Davidson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 6th (6) Are Parents Married? Yes (7) DATE OF BIRTH March 22 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Le B. Davidson
 (9) PRESENT POSTOFFICE OF FATHER Early Branch SC
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 39 (Years)
 (12) BIRTHPLACE Hampson County SC
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 6th

MOTHER.

(14) NAME BEFORE MARRIAGE Era Grimes
 (15) PRESENT POSTOFFICE OF MOTHER Early Branch SC
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 37 (Years)
 (18) BIRTHPLACE Hampson County SC
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) T. B. Whitley (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Early Branch SC

Given name added from a supplemental report

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

(27) Filed Mar 25 1916 (28) T. B. Whitley 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.