

(1) PLACE OF BIRTH:

County of Williamsburg
 Township of None
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

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

File No.—for State Registrar Only

22851

Registration District No. 4301Registered No. 77
(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.)

(2) Full Name of Child Made Oliver Harrison If child is not yet named, make supplemental report directed

(3) SEX girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Age Parents Married? Yes (7) DATE OF BIRTH July 10 1923
 To be answered only in event of Twin or Triplet (Year) (Month) (Day) (Year)

FATHER.

(8) FULL NAME John Samuel Harrison
 (9) PRESENT POSTOFFICE OF FATHER Greelyville S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 42
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer.
 (14) Number of children born to mother, including present birth 8

MOTHER.

(14) NAME BEFORE MARRIAGE Charlie Stalden
 (15) PRESENT POSTOFFICE OF MOTHER Greelyville S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 26
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife
 (20) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 4:30 P.M. on the date above stated.
 (Born alive or stillborn) (Hour, M., or P. M.)

(23) (Signature) D. J. Hogan
 (24) State whether Physician or Midwife M.D. (25) Address of Physician or Midwife Greelyville 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 July 12 1923 (28) W. C. Blackwell 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.