

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

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

(2) Full Name of Child

File No.—For State Registrar Only

18251

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 1371

Registered No. 37
(For use of Local Registrar)

St.; Ward)

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

(3) BOY OR GIRL Boy	(4) Twin or Triplet? No	(5) Number in order of birth 1	(6) Are Parents Married Yes	(7) DATE OF BIRTH June 12, 1922 (Name of Month) (Day) (Year)
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FATHER		MOTHER	
(8) FULL NAME Herbert Harwin	(14) NAME BEFORE MARRIAGE Susan Felder	(15) PRESENT POSTOFFICE OF FATHER St Paul S.C.	(15) PRESENT POSTOFFICE OF MOTHER St Paul S.C.
(9) PRESENT POSTOFFICE OF FATHER St Paul S.C.	(16) COLOR OR RACE Black	(17) AGE AT LAST BIRTHDAY 22	(17) AGE AT LAST BIRTHDAY 23
(10) COLOR OR RACE Black	(18) BIRTHPLACE Charleston S.C.	(18) BIRTHPLACE Charleston S.C.	(19) OCCUPATION Housewife
(11) AGE AT LAST BIRTHDAY 22	(19) OCCUPATION Housewife	(20) Number of children born to mother, including present birth 3	(21) Number of children of this mother now living, including present birth 3
(12) BIRTHPLACE Charleston S.C.			
(13) OCCUPATION Iron Hand			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was at M.,
on the date above stated. (Month and day of birth) (Hour A. M. or P. M.)

(23) (Signature) Susan Harwin

(24) State whether Physician or Midwife

(25) (Signature) Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Registrar

(28) 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.